# Case 18-11989 Doc 1 Filed 04/24/18 Entered 04/24/18 17:44:55 Desc Main Document Page 1 of 64

| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| rt 1: Identify Yo                                 | ourself   |   |   |   |
|---|---|---|---|---|
|   |   | About Debtor 1:   |   | About Debtor 2 (Spouse Only in a Joint Case):   |
| Your full name                                    | •   |   |   |   |
|   |   | Nicole  |   |   |
| picture identification example, your of           | ture identification (for  | First name  |   | First name  |
| license or pass                                   | sport).   | Middle name   |   | Middle name   |
|   |   | Willis  |   |   |
|   |   | Last name and Suffix (Sr., Jr., II, III)  |   | Last name and Suffix (Sr., Jr., II, III)  |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| your Social Se<br>number or fed<br>Individual Tax | curity<br>eral<br>payer   | xxx-xx-0106   |   |   |
|   | Write the name your governmen picture identification to meeting with the All other name used in the last 1 your Social Senumber or fed Individual Tax Identification in | Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Willis  Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Willis Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  About Debtor 1:  Nicole First name  Willis Last name and Suffix (Sr., Jr., II, III) |

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Document Case number (if known) Debtor 1 Nicole Willis

|  |   | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |  |
|--|---|--|---|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names |   | ■ I have not used any business name or EINs.  Business name(s)  EINs   | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |  |  |  |
| 5.   | Where you live  | 1318 W 105h PI Chicago, IL 60643  Number, Street, City, State & ZIP Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code | If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code |  |  |  |
| 6.   | Why you are choosing this district to file for bankruptcy | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)   |  |  |  |

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Case number (if known) Debtor 1 Nicole Willis

| ar         | t 2: Tell the Court About  | Your E  | 3ankruptcy Ca                 | se                                  |                                    |                               |   |                       |  |    |
|------------|--|---|-------------------------------|-------------------------------------|------------------------------------|-------------------------------|---|-----------------------|--|----|
| 7.         | The chapter of the Bankruptcy Code you are   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |                               |                                     |                                    |                               |   |                       |  |    |
|            | choosing to file under   | Chapter 7   |                               |                                     |                                    |                               |   |                       |  |    |
|            |  |   | Chapter 11                    |                                     |                                    |                               |   |                       |  |    |
|            |  |   | Chapter 12                    |                                     |                                    |                               |   |                       |  |    |
|            |  |   | Chapter 13                    |                                     |                                    |                               |   |                       |  |    |
|            |  |   |                               |                                     |                                    |                               |   |                       |  |    |
| 3.         | How you will pay the fee   |   | about how yo                  | u may pay. Ty<br>attorney is sub    | pically, if you are                | e paying the                  | fee yourself, you r                       | may pay with cash, ca | cal court for more detail<br>ashier's check, or mone<br>credit card or check wit                   | y  |
|            |  |   |                               |                                     | stallments. If yo                  |                               | s option, sign and                        | attach the Applicatio | n for Individuals to Pay   |    |
|            |  |   | but is not requapplies to you | uired to, waive<br>ur family size a | your fee, and m<br>nd you are unab | ay do so onl<br>le to pay the | y if your income is<br>fee in installment | less than 150% of th  | 7. By law, a judge may<br>ne official poverty line the<br>option, you must fill ou<br>ur petition. | at |
| <b>)</b> . | Have you filed for bankruptcy within the   | ■ N   | 0.                            |                                     |                                    |                               |   |                       |  |    |
|            | last 8 years?  | ΠY  | es.                           |                                     |                                    |                               |   |                       |  |    |
|            |  |   | District                      |                                     |                                    |                               |   |                       |  | _  |
|            |  |   | District                      |                                     |                                    | When                          |   | _ Case number         |  |    |
|            |  |   | District                      |                                     |                                    | When                          |   | Case number           |  |    |
| 10.        | Are any bankruptcy   | ■ N   | 0                             |                                     |                                    |                               |   |                       |  |    |
|            | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ПΥ  | es.                           |                                     |                                    |                               |   |                       |  |    |
|            |  |   | Debtor                        |                                     |                                    |                               |   | Relationship to you   |  |    |
|            |  |   | District                      |                                     |                                    | When                          |   | Case number, if kno   | own  |    |
|            |  |   | Debtor                        |                                     |                                    |                               |   | Relationship to you   |  |    |
|            |  |   | District                      |                                     |                                    | When                          |   | Case number, if kno   | own  |    |
| 11.        | Do you rent your   | □N  | lo. Go to li                  | ne 12.                              |                                    |                               |   |                       |  |    |
|            | residence?   | <b>■</b> Y  | es. Has yo                    | ur landlord obt                     | ained an evictio                   | n judgment a                  | against you?                              |                       |  |    |
|            |  | - 1   |                               | No. Go to line                      | 12.                                |                               |   |                       |  |    |
|            |  |   | _                             |                                     | nitial Statement                   | About an Evi                  | ction Judgment A                          | gainst You (Form 101  | 1A) and file it with this  |    |
|            |  |   |                               |                                     |                                    |                               |   |                       |  |    |

| Deb | otor 1   | Nicole Willis  |                         |  | Document Page 4 of 64 Case num                             | nber (if known)                                  |  |  |
|-----|--|--|-------------------------|--|--|--|--|--|
|     |  |  |                         |  |  |  |  |  |
| Par | t 3:   | Report About Any Bu  | sinesses \              | ou Own   | as a Sole Proprietor                                       |  |  |  |
| 12. | of an  | you a sole proprietor<br>by full- or part-time<br>ness?  | ■ No.                   | Go to  | art 4.   |  |  |  |
|     |  |  | ☐ Yes.                  | Name   | and location of business                                   |  |  |  |
|     | A sol  | e proprietorship is a  |                         |  |  |  |  |  |
|     | an in<br>sepa<br>as a  | less you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. |                         |  | of business, if any  |  |  |  |
|     | sole   | have more than one proprietorship, use a rate sheet and attach                                 |                         | Numb   | r, Street, City, State & ZIP Code                          |  |  |  |
|     |  | his petition.  |                         | Check  | the appropriate box to describe your business:             |  |  |  |
|     |  |  |                         |  | Health Care Business (as defined in 11 U.S.C. § 101(27A)   | )  |  |  |
|     |  |  |                         |  | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51 | B))  |  |  |
|     |  |  |                         |  | Stockbroker (as defined in 11 U.S.C. § 101(53A))           |  |  |  |
|     |  |  |                         |  | Commodity Broker (as defined in 11 U.S.C. § 101(6))        |  |  |  |
|     |  |  |                         |  | None of the above  |  |  |  |
| 13. | Chap<br>Bank   | rou filing under<br>oter 11 of the<br>cruptcy Code and are<br>a s <i>mall busin</i> ess<br>or? | deadlines<br>operations | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set approdeadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the prod in 11 U.S.C. 1116(1)(B). |  |  |  |  |
|     | For a  | definition of small  | ■ No.                   | I am n   | t filing under Chapter 11.                                 |  |  |  |
|     |  | ness debtor, see 11<br>C. § 101(51D).  | □ No.                   | I am fi<br>Code.   | ng under Chapter 11, but I am NOT a small business debto   | r according to the definition in the Bankruptcy  |  |  |
|     |  |  | ☐ Yes.                  | I am fi  | ng under Chapter 11 and I am a small business debtor acc   | ording to the definition in the Bankruptcy Code. |  |  |
| Par | t 4:   | Report if You Own or   | Have Any                | Hazardo  | s Property or Any Property That Needs Immediate Atte       | ntion  |  |  |
| 14. |  | ou own or have any erty that poses or is   | ■ No.                   |  |  |  |  |  |
|     | alleg<br>of im   | ed to pose a threat<br>minent and<br>ifiable hazard to   | ☐ Yes.                  | What is t  | e hazard?  |  |  |  |
|     | public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention? |  |                         |  | ate attention is /hy is it needed?                         |  |  |  |
|     | For e  | xample, do you own   |                         |  |  |  |  |  |

Number, Street, City, State & Zip Code

Where is the property?

perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

Debtor 1 Nicole Willis Document Page 5 of 64 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 64 Case number (if known) Debtor 1 **Nicole Willis** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to **□** \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nicole Willis **Nicole Willis** Signature of Debtor 2 Signature of Debtor 1 Executed on April 24, 2018 Executed on

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Nicole Willis Document Page 7 of 64 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Julie M Gleason                    | Date          | April 24, 2018     |  |
|--|---------------|--------------------|--|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY     |  |
| Iulia M Classer 6272526                |               |                    |  |
| Julie M Gleason 6273536                |               |                    |  |
| Printed name                           |               |                    |  |
| Gleason & Gleason                      |               |                    |  |
| Firm name                              |               |                    |  |
| 77 W Washington, Ste 1218              |               |                    |  |
| Chicago, IL 60602                      |               |                    |  |
| Number, Street, City, State & ZIP Code |               |                    |  |
| Contact phone (312) 578-9530           | Email address | troy@chicagobk.com |  |
| 6273536 IL                             |               |                    |  |
| Bar number & State                     |               | <del></del>        |  |

|                     |                          | DOCUME            | <u>eni Pane 8 01 64 </u> |    |
|---------------------|--------------------------|-------------------|--------------------------|----|
| Fill in this inforr | mation to identify your  | case:             |                          |    |
| Debtor 1            | Nicole Willis            |                   |                          |    |
|                     | First Name               | Middle Name       | Last Name                |    |
| Debtor 2            |                          |                   |                          |    |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name                |    |
| United States Ba    | inkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS              |    |
| Case number _       |                          |                   |                          | пс |
| ( 14.011.)          |                          |                   |                          | _  |
|                     |                          |                   |                          | aı |

Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your a      | ssets<br>of what you own |
|-----|--|-------------|--------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 223,363.00               |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 36,780.00                |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 260,143.00               |
| Par | t 2: Summarize Your Liabilities  |             |                          |
|     |  |             | abilities<br>It you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 309,690.00               |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$          | 8,095.85                 |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 42,084.18                |
|     | Your total liabilities   | \$          | 359,870.03               |
| Par | t 3: Summarize Your Income and Expenses  | <u> </u>    |                          |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 4,025.00                 |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 4,023.00                 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |             |                          |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other sc | hedules.                 |
| 7.  | ■ Yes What kind of debt do you have?   |             |                          |
|     |  |             |                          |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

4,025.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | aim       |
|--|-----------|-----------|
| From Part 4 on Schedule E/F, copy the following:   |           |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 8,095.85  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$        | 2,926.00  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 11,021.85 |

Contact Agent

Or call 708-628-5652 for more info

Note: This property is not currently for sale or for rent. The description below may be from a previous listing.

New Construction and Special Financing Option Only 3% Down and NO PMI plus \$1000 CCC.

24

### **Facts and Features**

Type
Single
Family

P

Lot
3,123

Cooling
Parking
Central

Year
Built
2015
Heating
Forced air

### INTERIOR FEATURES

Beds: 3

Bedrooms Appliances

**Appliánces** 

|      | (                          | Case 18-11989                      | Doc 1             |              | )4/24/18<br>Iment                  | Entered 04/24/18   | 17:44:55   | Desc       | Main                                |               |
|------|----------------------------|------------------------------------|-------------------|--------------|------------------------------------|--|--|------------|-------------------------------------|---------------|
| Fill | in this inf                | ormation to identify y             | our case and t    | his filing:  |                                    |  |  |            |                                     |               |
| Deb  | otor 1                     | Nicole Willis First Name           | Middl             | le Name      |                                    | Last Name  |  |            |                                     |               |
|      | otor 2<br>ouse, if filing) | First Name                         | Middl             | le Name      |                                    | Last Name  |  |            |                                     |               |
| Uni  | ted States                 | Bankruptcy Court for th            | ne: NORTHEF       | RN DISTR     | ICT OF ILLIN                       | IOIS   |  |            |                                     |               |
| Cas  | se number                  |                                    |                   |              |                                    | -  |  |            | Check if this amended fil           |               |
| _    |                            | orm 106A/B                         | anorty.           |              |                                    |  |  |            | 4.6                                 | \(\delta = \) |
|      |                            | ile A/B: Pro                       |                   |              | mby amag. If a                     | n asset fits in more than one c  | atamam, liat tha a   | ooot in th |                                     | 2/15          |
| nfor | mation. If n               | nore space is needed, at           | tach a separate s | sheet to thi | s form. On the                     | are filing together, both are ed<br>top of any additional pages, v<br>n or Have an Interest In |  |            |                                     | n).           |
| D    | o vou own                  | or have any legal or equi          | table interest in | anv reside   | nce. buildina.                     | land, or similar property?   |  |            |                                     |               |
| _    | _                          | , , ,                              | table interest in | any rootao   | noo, bananig,                      | iana, or ominiar property.   |  |            |                                     |               |
|      | No. Go to                  |                                    |                   |              |                                    |  |  |            |                                     |               |
|      | ■ Yes. Whe                 | re is the property?                |                   |              |                                    |  |  |            |                                     |               |
| 1.1  |                            |                                    |                   | What i       | s the property                     | ? Check all that apply   |  |            |                                     |               |
|      |                            | 105th PI                           | ntion             |              |                                    |  | Do not deduct sec  |            |                                     |               |
|      | Street addre               | ess, if available, or other descri | puon              |              | Duplex or mult<br>Condominium      | -  | the amount of any secured claims on Sc<br>Creditors Who Have Claims Secured by |            |                                     |               |
|      | Chicag                     | o IL                               | 60643-0000        |              | Manufactured (                     | or mobile home   | Current value of entire property?  |            | Current value of<br>portion you own |               |
|      | City                       | State                              | ZIP Code          |              | Investment pro                     | pperty   | \$223,36   | 3.00       | \$223,3                             | 63.00         |
|      |                            |                                    |                   |              | Other                              | in the manual O o  | Describe the nate (such as fee simple a life estate), if keep                  | ple, tenan |                                     |               |
|      |                            |                                    |                   |              | Debtor 1 only                      | in the property? Check one   | a mo ootatoj, n k  |            |                                     |               |
|      | Cook                       |                                    |                   |              | Debtor 2 only                      | -  |  |            |                                     |               |
|      | County                     |                                    |                   |              | Debtor 1 and E                     | Debtor 2 only  | - Chack if this  | is comm    | unity property                      |               |
|      |                            |                                    |                   |              | At least one of                    | the debtors and another  | (see instruction   |            | anity property                      |               |
|      |                            |                                    |                   |              | information yo<br>ty identificatio | ou wish to add about this item,<br>on number:  | such as local  |            |                                     |               |
|      |                            |                                    |                   | \$268        | 000 Mortga                         | ge BMO Harris  |  |            |                                     |               |
|      |                            |                                    |                   |              |                                    |  |  |            |                                     |               |
|      |                            |                                    |                   |              |                                    |  |  |            |                                     |               |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$223,363.00

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Case number (if known) Document

**Nicole Willis** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Volvo Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **XC60** Creditors Who Have Claims Secured by Property. Model: ■ Debtor 1 only 2016 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another **Motor Vehicle:** \$22,150.00 \$22,150.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Mini Who has an interest in the property? Check one 3.2 Make: the amount of any secured claims on Schedule D: Cooper Creditors Who Have Claims Secured by Property. ■ Debtor 1 only Model: 2013 Debtor 2 only Current value of the Current value of the 59000 Approximate mileage: ☐ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$11,350.00 \$11,350.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$33,500.00 Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Π Nο Yes. Describe..... Misc. Household Goods (Bedroom Furniture, Kitchen Appliances, \$1,000.00 tables, chairs, sofas) Sectional sofa \$500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Consumer Electronics (Including Televisions, Radios, Computers, \$200.00 Games, Phones, Stereos)

Official Form 106A/B

Debtor 1

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Case number (if known) Document Debtor 1 **Nicole Willis** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$200.00 Used Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Misc. Costume Jewelry \$50.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,950.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No Cash on Hand \$30.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

Case 18-11989 Filed 04/24/18 Entered 04/24/18 17:44:55 Page 14 of 64
Case number (if known) Document Debtor 1 **Nicole Willis** Institution name: Yes..... **Checking Account** \$100.00 17.1. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ Yes. Give specific information about them..... % of ownership: Name of entity: Hair Salon - Rent Space/Chair Has Business \$0.00 **Checking (Negative)** 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own?

Doc 1

Desc Main

Case 18-11989 Doc 1 Filed 04/24/18 Entered 04/24/18 17:44:55 Desc Main Document Page 15 of 64 Case number (if known) Debtor 1 **Nicole Willis** Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Estimated 2017 Federal Income Tax **Refund WILL BE INTERCETEPTED** \$0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term Life Insurance Policy w/State \$0.00 Farm - No CSV 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ No

Yes. Describe each claim.......

Non Return of Security Deposit against former Landlord - no attorney retained

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$1,330,00

\$1,200,00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

| Debt   | or 1          | Case 18-11989 Nicole Willis                 | Doc 1           | Filed 04/2<br>Docume |          | Entered 04<br>Page 16 of | 4/24/18 17:44:55<br>64<br>Case number (if known) | Desc Main                |
|--------|---------------|---|-----------------|----------------------|----------|--------------------------|--|--------------------------|
|        |               |   |                 |                      |          |                          | Case Hamber (ii known)                           |                          |
|        | •             | own or have any legal or equi<br>to Part 6. | itable interest | in any business-re   | elated p | roperty?                 |  |                          |
|        |               |   |                 |                      |          |                          |  |                          |
| ш      | Yes. G        | Go to line 38.                              |                 |                      |          |                          |  |                          |
|        |               |   |                 |                      |          |                          |  |                          |
| Part 6 |               | scribe Any Farm- and Commo                  |                 |                      | You Ow   | n or Have an Interes     | st In.   |                          |
| 46 D   | ווס אסנו      | own or have any legal or                    | r equitable in  | nterest in any far   | m- or o  | commercial fishir        | ng-related property?                             |                          |
| _      |               | Go to Part 7.                               | equitable ii    | itorost iii uriy rui | 0        | Johnner Glar Hollin      | ig related property.                             |                          |
| _      | _             | . Go to line 47.                            |                 |                      |          |                          |  |                          |
| •      | _ 100.        | . 60 to line 17.                            |                 |                      |          |                          |  |                          |
| Part 7 | 7:            | Describe All Property You                   | Own or Have a   | an Interest in That  | You Dic  | d Not List Above         |  |                          |
|        |               | have other property of an                   |                 |                      | ist?     |                          |  |                          |
|        | Lxamp<br>I No | ores. Season lickets, country               | y club membe    | erariip              |          |                          |  |                          |
|        | _             | Give specific information                   |                 |                      |          |                          |  |                          |
|        |               |   |                 |                      |          |                          |  |                          |
| 54.    | Add t         | he dollar value of all of yo                | our entries fr  | om Part 7. Write     | that n   | umber here               |  | \$0.00                   |
| D. 44  | •             | Liver Table (F. J. B. )                     | . ( 4 % =       |                      |          |                          |  |                          |
| Part 8 | 8:            | List the Totals of Each Part                | of this Form    |                      |          |                          |  |                          |
| 55.    | Part 1        | : Total real estate, line 2                 |                 |                      |          |                          |  | \$223,363.00             |
| 56.    | Part 2        | 2: Total vehicles, line 5                   |                 |                      |          | \$33,500.00              |  |                          |
| 57.    | Part 3        | 3: Total personal and hous                  | sehold items    | s, line 15           |          | \$1,950.00               |  |                          |
| 58.    | Part 4        | l: Total financial assets, li               | ine 36          |                      |          | \$1,330.00               |  |                          |
| 59.    | Part 5        | i: Total business-related រ                 | property, line  | e 45                 |          | \$0.00                   |  |                          |
|        |               | 6: Total farm- and fishing-                 |                 | •                    |          | \$0.00                   |  |                          |
| 61.    | Part 7        | 7: Total other property not                 | t listed, line  | 54                   | +        | \$0.00                   |  |                          |
| 62.    | Total         | personal property. Add lin                  | nes 56 throug   | h 61                 |          | \$36,780.00              | Copy personal property t                         | otal <b>\$36,780.0</b> 0 |

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$260,143.00

|   |                         | I A A A HI III.   |             | <i></i> |
|---|-------------------------|-------------------|-------------|---------|
| Fill in this inform                     | nation to identify your | case:             |             |         |
| Debtor 1                                | Nicole Willis           |                   |             |         |
|   | First Name              | Middle Name       | Last Name   |         |
| Debtor 2                                |                         |                   |             |         |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name   |         |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS |         |
| Case number                             |                         |                   |             |         |
| (if known)                              |                         |                   |             |         |
|   |                         |                   |             |         |

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the<br>portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption |
|--|---|-----|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B     | Che | ck only one box for each exemption.                             |                                    |
| 1318 W 105th PI Chicago, IL 60643<br>Cook County                                       | \$223,363.00                            |     | \$15,000.00   | 735 ILCS 5/12-901                  |
| \$268000 Mortgage BMO Harris Line from Schedule A/B: 1.1                               |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2016 Volvo XC60<br>Motor Vehicle:  | \$22,150.00                             |     | \$2,400.00  | 735 ILCS 5/12-1001(c)              |
| Line from Schedule A/B: 3.1  |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| 2016 Volvo XC60<br>Motor Vehicle:  | \$22,150.00                             |     | \$0.00  | 735 ILCS 5/12-1001(b)              |
| Line from Schedule A/B: 3.1  |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Misc. Household Goods (Bedroom Furniture, Kitchen Appliances,                          | \$1,000.00                              | •   | \$1,000.00  | 735 ILCS 5/12-1001(b)              |
| tables, chairs, sofas) Line from Schedule A/B: 6.1                                     |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |
| Used Clothing Line from Schedule A/B: 11.1   | \$200.00                                | •   | 100%  | 735 ILCS 5/12-1001(a)              |
| Enteriori Schedule AVD. 11.1   |   |     | 100% of fair market value, up to any applicable statutory limit |                                    |

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| Debtor 1 | Nicole Willis  | Document                             |        | Case number (if known)  |                                    |
|----------|--|--------------------------------------|--------|---|------------------------------------|
|          | description of the property and line on edule A/B that lists this property     | Current value of the portion you own | Amo    | ount of the exemption you claim                                 | Specific laws that allow exemption |
|          |  | Copy the value from<br>Schedule A/B  | Che    | eck only one box for each exemption.                            |                                    |
|          | c. Costume Jewelry<br>from Schedule A/B: 12.1                                  | \$50.00                              |        | \$50.00   | 735 ILCS 5/12-1001(b)              |
| Line     | Total Confedence 702. 1211   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|          | h on Hand<br>from Schedule A/B: <b>16.1</b>                                    | \$30.00                              |        | \$30.00   | 735 ILCS 5/12-1001(b)              |
| LINE     | Hom Schedule AVD. 19.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|          | cking: Checking Account  | \$100.00                             |        | \$100.00  | 735 ILCS 5/12-1001(b)              |
| LINE     | Holli Schedule PVD. 17.1   |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|          | imated 2017 Federal Income Tax<br>und WILL BE INTERCETEPTED                    | \$0.00                               |        | \$0.00  | 735 ILCS 5/12-1001(b)              |
|          | from Schedule A/B: 28.1  |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|          | imated 2017 Federal Income Tax<br>und WILL BE INTERCETEPTED                    | \$0.00                               |        | \$0.00  | 735 ILCS 5/12-1001(g)(1)           |
|          | from Schedule A/B: 28.1  |                                      |        | 100% of fair market value, up to any applicable statutory limit |                                    |
|          | you claiming a homestead exemption<br>oject to adjustment on 4/01/19 and every |                                      |        | led on or after the date of adjustmer                           | nt.)                               |
| _        | Yes. Did you acquire the property covere                                       | ed by the exemption wi               | thin 1 | ,215 days before you filed this case                            | ?                                  |
|          | □ No   |                                      |        |   |                                    |
|          | ☐ Yes  |                                      |        |   |                                    |

|  |  | Document   | Page 19             | of 64  |  |                   |
|--|--|--|---------------------|--|--|-------------------|
| Fill in this informatio                    | n to identify you                          | ır case:   |                     |  |  |                   |
| Debtor 1 N                                 | icole Willis                               |  |                     |  |  |                   |
|  | rst Name                                   | Middle Name  | Last Name           |  | -  |                   |
| Debtor 2                                   |  |  |                     |  |  |                   |
| (Spouse if, filing) Fire                   | st Name                                    | Middle Name  | Last Name           |  |  |                   |
| United States Bankrup                      | otcy Court for the:                        | NORTHERN DISTRICT OF ILL   | INOIS               |  |  |                   |
|  |  |  |                     |  | -  |                   |
| Case number                                |  |  |                     |  | □ Chao   | k if this is an   |
| (II KIIOWII)                               |  |  |                     |  |  | k if this is an   |
|  |  |  |                     |  | amer   | ded filing        |
| Official Form 10                           | 06D  |  |                     |  |  |                   |
|  |  | Mar Haye Claims (  | C = = = = =         | l lass Duamant   |  |                   |
| Schedule D:                                | Creditors                                  | Who Have Claims  | securea             | by Propert   | <u>y</u>   | 12/15             |
|  |  | If two married people are filing togethe<br>out, number the entries, and attach it t   |                     |  |  |                   |
| 1. Do any creditors have                   | claims secured by                          | y your property?   |                     |  |  |                   |
| ☐ No. Check this                           | box and submit tl                          | his form to the court with your other  | schedules. Yo       | u have nothing else                                    | to report on this form.                                |                   |
| _  |  | •  |                     |  |  |                   |
| Yes. Fill in all o                         | the information                            | below.   |                     |  |  |                   |
| Part 1: List All Sec                       | cured Claims                               |  |                     | Calumn A   | Calumn D   | Column C          |
| for each claim. If more th                 | an one creditor has                        | more than one secured claim, list the cred<br>a particular claim, list the other creditors<br>cal order according to the creditor's name | in Part 2. As       | Amount of claim Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Unsecured portion |
| 2.1 Ally Financial                         |  | Describe the property that secures the   | he claim:           | \$20,774.00  | \$22,150.00  | \$0.00            |
| Creditor's Name                            |  | 2016 Volvo XC60  |                     |  |  |                   |
|  |  |  |                     |  |  |                   |
| Attn: Bankrup                              | •  | As of the date you file, the claim is: (   | Chock all that      |  |  |                   |
| Po Box 38090                               |  | apply.   | SHECK all that      |  |  |                   |
| Bloomington,                               |  | Contingent   |                     |  |  |                   |
| Number, Street, City,                      | State & Zip Code                           | Unliquidated   |                     |  |  |                   |
| Who awas the debto                         | St   | Disputed   |                     |  |  |                   |
| Who owes the debt?                         | cneck one.                                 | Nature of lien. Check all that apply.  |                     |  |  |                   |
| ■ Debtor 1 only                            |  | An agreement you made (such as n car loan)   | nortgage or secu    | urea   |  |                   |
| Debtor 2 only                              |  | ,<br>-   |                     |  |  |                   |
| Debtor 1 and Debtor 2                      |  | ☐ Statutory lien (such as tax lien, med  | hanic's lien)       |  |  |                   |
| At least one of the del                    |  | ☐ Judgment lien from a lawsuit   | Durchasa M          | Ionov Socurity   |  |                   |
| ☐ Check if this claim re<br>community debt | elates to a                                | Other (including a right to offset)  | Fulchase W          | ioney Security   |  |                   |
| Date debt was incurred                     | Opened<br>09/15 Last<br>Active<br>12/29/17 | Last 4 digits of account numb  | <sub>per</sub> 8239 |  |  |                   |
|  |  |  |                     |  |  |                   |
| 2.2 BMO Harris B                           | ank N.A.                                   | Describe the property that secures to  | he claim:           | \$268,000.00   | \$223,363.00   | \$44,637.00       |
| Creditor's Name                            |  | 1318 W 105th PI Chicago, IL  | 60643               |  |  |                   |
|  |  | Cook County  |                     |  |  |                   |
| 111 W. Monro                               | e St., Floor                               | \$268000 Mortgage BMO Hart<br>As of the date you file, the claim is:   |                     |  |  |                   |
| 21E  | 2002 4000                                  | apply.   | Shook all triat     |  |  |                   |
| Chicago, IL 60                             |  | Contingent   |                     |  |  |                   |
| Number, Street, City,                      | State & Zip Code                           | ☐ Unliquidated   |                     |  |  |                   |
| Who owes the debt?                         | Shock one                                  | Disputed  Nature of lien. Check all that apply.  |                     |  |  |                   |
| _  | DIECK UIE.                                 |  | martagas            | uro d  |  |                   |
| Debtor 1 only                              |  | An agreement you made (such as n car loan)   | nortgage or sect    | ured   |  |                   |
| Debtor 2 only                              |  | _  |                     |  |  |                   |
| Debtor 1 and Debtor 2                      |  | Statutory lien (such as tax lien, med  | :hanic's lien)      |  |  |                   |
| ☐ At least one of the del                  | otors and another                          | Judgment lien from a lawsuit   |                     |  |  |                   |

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| Debtor 1 Nicole Willis   | S  |   | Case               | e number (if know) |             |            |
|--|--|---|--------------------|--------------------|-------------|------------|
| First Name   | Middle N                                   | ame Last Name   |                    | -                  |             |            |
| ☐ Check if this claim rela   | ites to a                                  | Other (including a right to offset)                         |                    |                    |             |            |
| Date debt was incurred   |  | Last 4 digits of account numbe                              | er                 |                    |             |            |
| 2.3 Chase Auto Fina  | ance                                       | Describe the property that secures the                      | e claim:           | \$14,559.00        | \$11,350.00 | \$3,209.00 |
| Creditor's Name  |  | 2013 Mini Cooper  |                    | <u> </u>           | <u> </u>    | ψο,Ξοσίου  |
| National Bankru<br>Dept  | uptcy                                      | 2010 IIIIII Goopei  |                    |                    |             |            |
| 201 N Central A  | ve Ms                                      | As of the date you file, the claim is: Ch                   | neck all that      |                    |             |            |
| Az1-1191<br>Phoenix, AZ 850  | 004  | apply.<br>□ Contingent                                      |                    |                    |             |            |
| Number, Street, City, Sta  | te & Zip Code                              | ☐ Unliquidated  |                    |                    |             |            |
| Who owes the debt? Che   | eck one.                                   | ☐ Disputed  Nature of lien. Check all that apply.           |                    |                    |             |            |
| Debtor 1 only  |  | ☐ An agreement you made (such as mo                         | ortgage or secured |                    |             |            |
| Debtor 2 only  |  | car loan)   |                    |                    |             |            |
| Debtor 1 and Debtor 2 o  | nly  | ☐ Statutory lien (such as tax lien, mech                    | anic's lien)       |                    |             |            |
| ☐ At least one of the debto  | ors and another                            | ☐ Judgment lien from a lawsuit                              | •                  |                    |             |            |
| ☐ Check if this claim rela   | ites to a                                  | Other (including a right to offset)                         | Purchase Mon       | ey Security        |             |            |
|  | Opened<br>05/16 Last<br>Active<br>8/14/17  | Last 4 digits of account numbe                              | 5008               |                    |             |            |
| 2.4 Home Furnish   |  | Describe the property that secures the                      | e claim:           | \$6,357.00         | \$500.00    | \$5,857.00 |
| Creditor's Name  |  | Sectional sofa  |                    |                    |             |            |
| Attention: Legal<br>5324 Virginia Be<br>Boulevard<br>Virginia Beach, | each                                       | As of the date you file, the claim is: Chapply.  Contingent | neck all that      |                    |             |            |
| Number, Street, City, Sta  | te & Zip Code                              | ☐ Unliquidated  |                    |                    |             |            |
| Who owes the debt? Che   | eck one.                                   | ☐ Disputed  Nature of lien. Check all that apply.           |                    |                    |             |            |
| ■ Debtor 1 only □ Debtor 2 only                                      |  | ☐ An agreement you made (such as mo car loan)               | ortgage or secured |                    |             |            |
| Debtor 1 and Debtor 2 o  | nly  | ☐ Statutory lien (such as tax lien, mech                    | anic's lien)       |                    |             |            |
| ☐ At least one of the debto  | -  | ☐ Judgment lien from a lawsuit                              | ,                  |                    |             |            |
| ☐ Check if this claim rela   | ites to a                                  |   | Purchase Mon       | ey Security        |             |            |
|  | Opened<br>07/16 Last<br>Active<br>12/26/17 | Last 4 digits of account numbe                              | <sub>er</sub> 4241 |                    |             |            |
|  |  | _   |                    |                    |             |            |
|  |  |   |                    |                    |             |            |
| Add the dollar value of y  | our entries in C                           | column A on this page. Write that number                    | er here:           | \$309,690.0        | 0           |            |
| If this is the last page of  |  | the dollar value totals from all pages.                     |                    | \$309,690.0        | 0           |            |

### Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|                                       |   | Document   | Page 21 of                                   | f 64                     |                       |                    |
|---------------------------------------|---|--|--|--------------------------|-----------------------|--------------------|
| Fill in this infor                    | mation to identify your ca  | ise:   |  |                          |                       |                    |
| Debtor 1                              | Nicole Willis   |  |  |                          |                       |                    |
|                                       | First Name  | Middle Name  | Last Name                                    |                          |                       |                    |
| Debtor 2<br>(Spouse if, filing)       | First Name  | Middle Name  | Last Name                                    |                          |                       |                    |
|                                       |   |  |  |                          |                       |                    |
| United States Ba                      | ankruptcy Court for the:  | NORTHERN DISTRICT OF IL  | LINOIS                                       |                          |                       |                    |
| Case number                           |   |  |  |                          |                       |                    |
| (if known)                            |   |  |  |                          | ☐ Check               | if this is an      |
|                                       |   |  |  |                          | amend                 | ed filing          |
| Official For                          | m 106E/E  |  |  |                          |                       |                    |
|                                       |   | no Have Unsecured  | Claims                                       |                          |                       | 12/15              |
|                                       |   | Part 1 for creditors with PRIORIT  |  |                          | DDIODITY .I.' I'      |                    |
| eft. Attach the Co<br>ame and case nu | ntinuation Page to this page.<br>umber (if known).                    | ed by Property. If more space is<br>If you have no information to re   |  |                          |                       |                    |
|                                       | All of Your PRIORITY Uns  |  |  |                          |                       |                    |
|                                       | tors have priority unsecured  | claims against you?  |  |                          |                       |                    |
| ☐ No. Go to                           | Part 2.   |  |  |                          |                       |                    |
| Yes.                                  |   |  |  |                          |                       |                    |
| identify what t<br>possible, list t   | ype of claim it is. If a claim has<br>he claims in alphabetical order | If a creditor has more than one pric<br>both priority and nonpriority amoun<br>according to the creditor's name. If<br>cular claim, list the other creditors i | its, list that claim here you have more than | and show both priority a | nd nonpriority amount | s. As much as      |
| (For an explai                        | nation of each type of claim, see                                     | e the instructions for this form in the  | e instruction booklet.)                      |                          |                       |                    |
|                                       | ,   |  | ,  | Total claim              | Priority amount       | Nonpriority amount |
| 2.1 Illinois                          | Department of Revenu  | Last 4 digits of accou   | int number                                   | \$1,700.00               | \$1,700.00            | \$0.00             |
| •                                     | reditor's Name  | When was the debt in   | ourrod?                                      |                          |                       |                    |
|                                       | uptcy Section<br>x 64338  | When was the debt in   |  |                          |                       |                    |
| Chicag                                | jo, IL 60664-0338   |  |  |                          |                       |                    |
|                                       | Street City State Zlp Code  | As of the date you file  | e, the claim is: Chec                        | k all that apply         |                       |                    |
| _                                     | ed the debt? Check one.   | ☐ Contingent   |  |                          |                       |                    |
| Debtor 1                              | •   | ☐ Unliquidated   |  |                          |                       |                    |
| Debtor 2                              | •   | ☐ Disputed   |  |                          |                       |                    |
| Debtor 1                              | and Debtor 2 only   | Type of PRIORITY uns   |  |                          |                       |                    |
| ☐ At least of                         | one of the debtors and another  | ☐ Domestic support o   | bligations                                   |                          |                       |                    |
| ☐ Check if                            | this claim is for a communit  | y debt Taxes and certain of  | other debts you owe t                        | he government            |                       |                    |
| _                                     | subject to offset?  | ☐ Claims for death or  | personal injury while                        | you were intoxicated     |                       |                    |
| ■ No                                  |   | Other. Specify   |  |                          |                       |                    |
| ☐ Yes                                 |   |  |  |                          |                       |                    |

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| Deb  | tor 1 Nicole Willis                                   |  | Case no       | ımber (if know)  |            |        |
|------|---|--|---------------|------------------|------------|--------|
| 2.2  | Internal Revenue Service                              | Last 4 digits of account number          | 2015          | \$4,998.85       | \$4,998.85 | \$0.00 |
|      | Priority Creditor's Name PO Box 7346                  | When was the debt incurred?              | 2015          |                  |            |        |
|      | Philadelphia, PA 19101-7346                           | when was the debt incurred?              | 2013          |                  |            |        |
|      | Number Street City State Zlp Code                     | As of the date you file, the claim       | is: Check all | that apply       |            |        |
|      | Who incurred the debt? Check one.                     | ☐ Contingent                             |               |                  |            |        |
|      | ■ Debtor 1 only                                       | ☐ Unliquidated                           |               |                  |            |        |
|      | ☐ Debtor 2 only                                       | ☐ Disputed                               |               |                  |            |        |
|      | ☐ Debtor 1 and Debtor 2 only                          | Type of PRIORITY unsecured cla           | im:           |                  |            |        |
|      | ☐ At least one of the debtors and another             | ☐ Domestic support obligations           |               |                  |            |        |
|      | ☐ Check if this claim is for a community debt         | Taxes and certain other debts y          | ou owe the g  | overnment        |            |        |
|      | Is the claim subject to offset?                       | Claims for death or personal inj         | ury while you | were intoxicated |            |        |
|      | ■ No  | ☐ Other. Specify                         |               |                  |            |        |
|      | ☐ Yes   |  | argeable F    | Priority Taxes   |            |        |
| 2.3  | Internal Revenue Service                              | Last 4 digits of account number          | 2016          | \$1,397.00       | \$1,397.00 | \$0.00 |
|      | Priority Creditor's Name PO Box 7346                  | When was the debt incurred?              | 2016          |                  |            |        |
|      | Philadelphia, PA 19101-7346                           | when was the debt incurred?              | 2010          |                  |            |        |
|      | Number Street City State Zlp Code                     | As of the date you file, the claim       | is: Check all | that apply       |            |        |
|      | Who incurred the debt? Check one.                     | ☐ Contingent                             |               |                  |            |        |
|      | ■ Debtor 1 only                                       | ☐ Unliquidated                           |               |                  |            |        |
|      | ☐ Debtor 2 only                                       | ☐ Disputed                               |               |                  |            |        |
|      | ☐ Debtor 1 and Debtor 2 only                          | Type of PRIORITY unsecured cla           | im:           |                  |            |        |
|      | ☐ At least one of the debtors and another             | ☐ Domestic support obligations           |               |                  |            |        |
|      | ☐ Check if this claim is for a community debt         | Taxes and certain other debts y          | ou owe the g  | overnment        |            |        |
|      | Is the claim subject to offset?                       | Claims for death or personal inj         | ury while you | were intoxicated |            |        |
|      | ■ No  | ☐ Other. Specify                         |               |                  |            |        |
|      | Yes   | Non Disch                                | argeable F    | Priority Taxes   |            |        |
| Part | 2: List All of Your NONPRIORITY Unsecu                | ured Claims                              |               |                  |            |        |
| 3.   | Do any creditors have nonpriority unsecured claim     | ns against you?                          |               |                  |            |        |
|      | ☐ No. You have nothing to report in this part. Submit | this form to the court with your other s | schedules.    |                  |            |        |
|      |   | ,  |               |                  |            |        |
|      | Yes.  |  |               |                  |            |        |

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Nicole Willis Case number (if know) 4.1 \$4,607.00 Acceptance Now Last 4 digits of account number 6756 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/17 Last Active 5501 Headquarters Dr When was the debt incurred? 12/22/17 Plano, TX 75024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Rental Agreement ☐ Yes Atg Credit Llc \$2,998.00 4.2 Last 4 digits of account number 3378 Nonpriority Creditor's Name 1700 W Cortland St When was the debt incurred? **Opened 02/16** Ste 2 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Mercy Hospital And ☐ Yes Other. Specify **Medical Cen** 4.3 **Atg Credit LIc** Last 4 digits of account number 3447 \$1,009.00 Nonpriority Creditor's Name 1700 W Cortland St When was the debt incurred? **Opened 11/16** Ste 2 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Mercy Hospital And** ☐ Yes Other. Specify **Medical Cen** 

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Debtor 1 Nicole Willis Case number (if know) 4.4 \$1,967.00 **Barclays Bank Delaware** Last 4 digits of account number 9626 Nonpriority Creditor's Name Opened 08/15 Last Active 100 S West St When was the debt incurred? 12/15/17 Wilmington, DE 19801 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.5 **Capital One** 1901 \$429.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: General Opened 07/12 Last Active Correspondence/Bankruptcy When was the debt incurred? 10/14/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Credit Card** ☐ Yes Other. Specify Capital One/Neiman 2312 \$3,554.00 4.6 Marcus/Bergdorf Goodm Last 4 digits of account number Nonpriority Creditor's Name Opened 06/15 Last Active Po Box 729080 When was the debt incurred? 12/12/17 Dallas, TX 75372 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account T Yes

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Case number (if know) Debtor 1 Nicole Willis 4.7 \$254.00 Chase Last 4 digits of account number Nonpriority Creditor's Name **Bankruptcy Department** When was the debt incurred? PO Box 15145 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card/Overdraft ☐ Yes 4.8 **Chase Card Services** Last 4 digits of account number \$4,552.00 4583 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 9/13/16 Last Active Po Box 15298 When was the debt incurred? 8/28/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other. Specify 4.9 City of Chicago - Dept of Finance Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name When was the debt incurred? Administrative Hearings 121 N LaSalle St 107A Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Parking Tickets ☐ Yes

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Debtor 1 Nicole Willis Case number (if know) 4.1 \$406.00 Dept Of Ed/582/nelnet 7112 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Claims/Bankruptcy Opened 01/15 Last Active Po Box 82505 When was the debt incurred? 12/18/17 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 **Dsnb Bloomingdales** 7891 \$711.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 05/15 Last Active Po Box 8053 When was the debt incurred? 1/01/18 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.1 \$2.025.00 First Electronic Bank 8010 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 05/16 Last Active 2150 S 1300 E Ste 400 When was the debt incurred? 1/23/17 Salt Lake City, UT 84070 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

| Debtor | 1 Nicole Willis  | Case number (if know)   |              |
|--------|--|---|--------------|
| 4.1    | Harley Payida an Cradit Com                              |   | <b>#0.00</b> |
| 3      | Harley Davidson Credit Corp  Nonpriority Creditor's Name | Last 4 digits of account number   | \$0.00       |
|        | PO Box 829009<br>Dallas, TX 75382                        | When was the debt incurred?   |              |
|        | Number Street City State Zlp Code                        | As of the date you file, the claim is: Check all that apply   |              |
|        | Who incurred the debt? Check one.                        | ,   |              |
|        | Debtor 1 only  | ☐ Contingent  |              |
|        | ☐ Debtor 2 only  | ☐ Unliquidated  |              |
|        | ☐ Debtor 1 and Debtor 2 only                             | ☐ Disputed  |              |
|        | $\square$ At least one of the debtors and another        | Type of NONPRIORITY unsecured claim:  |              |
|        | ☐ Check if this claim is for a community                 | ☐ Student loans   |              |
|        | debt Is the claim subject to offset?                     | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |              |
|        | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |              |
|        | Yes  | Other. Specify  |              |
| 4.1    | Illinois Department of Revenue                           | Last 4 digits of account number   | Unknown      |
| 4      | Nonpriority Creditor's Name                              | Last 4 digits of account number   | - Cinaiowii  |
|        | Bankruptcy Section<br>PO Box 64338                       | When was the debt incurred?   |              |
|        | Chicago, IL 60664-0338                                   |   |              |
|        | Number Street City State Zlp Code                        | As of the date you file, the claim is: Check all that apply   |              |
|        | Who incurred the debt? Check one.                        |   |              |
|        | Debtor 1 only  | Contingent  |              |
|        | Debtor 2 only  | ☐ Unliquidated  |              |
|        | Debtor 1 and Debtor 2 only                               | Disputed  |              |
|        | At least one of the debtors and another                  | Type of NONPRIORITY unsecured claim:  |              |
|        | Check if this claim is for a community                   | Student loans   |              |
|        | debt Is the claim subject to offset?                     | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |              |
|        | ■ No   | Debts to pension or profit-sharing plans, and other similar debts   |              |
|        | Yes  | ■ Other. Specify Notice Only  |              |
| 4.1    | Illinois Dept of Employment Securit                      | Last 4 digits of account number Notic Only  | Unknown      |
| 5      | Nonpriority Creditor's Name                              |   |              |
|        | Bankruptcy Unit Collection Subdivis                      | When was the debt incurred?   |              |
|        | 33 S State St 10th Floor                                 |   |              |
|        | Chicago, IL 60603  Number Street City State Zlp Code     | As of the date were file the plains in Ot. 1. IIII.   |              |
|        | Who incurred the debt? Check one.                        | As of the date you file, the claim is: Check all that apply   |              |
|        | Debtor 1 only  | ☐ Contingent  |              |
|        | Debtor 2 only  | ☐ Unliquidated  |              |
|        | Debtor 1 and Debtor 2 only                               | ☐ Disputed  |              |
|        | ☐ At least one of the debtors and another                | Type of NONPRIORITY unsecured claim:  |              |
|        | ☐ Check if this claim is for a community                 | ☐ Student loans   |              |
|        | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |              |
|        | Is the claim subject to offset?                          | report as priority claims   |              |
|        | ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |              |
|        | □Yes   | ■ Other. Specify Notice Only  |              |

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Debtor 1 Nicole Willis Case number (if know) 4.1 2013 Internal Revenue Service \$88.01 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? 2013 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Internal Revenue Service** 2014 \$3,206.17 Last 4 digits of account number Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? 2014 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Taxes 4.1 Med Business Bureau 6162 \$130.00 8 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 04/17** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Rush University ☐ Yes Other. Specify Medical Center

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Debtor 1 Nicole Willis Case number (if know) 4.1 \$104.00 Med Business Bureau 6163 Last 4 digits of account number 9 Nonpriority Creditor's Name 1460 Renaissance Dr #400 When was the debt incurred? **Opened 04/17** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Rush University** ☐ Yes Other. Specify **Medical Center** 4.2 \$1,227.00 Nelnet 7224 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 07/01 Last Active **Nelnet Claims/Bankruptcy** Po Box 82505 When was the debt incurred? 9/20/17 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not debt report as priority claims Is the claim subject to offset? ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.2 6924 Nelnet \$649.00 Last 4 digits of account number Nonpriority Creditor's Name Nelnet Claims/Bankruptcy Opened 03/00 Last Active Po Box 82505 When was the debt incurred? 9/20/17 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts T Yes ☐ Other. Specify

Educational

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Case number (if know) Debtor 1 Nicole Willis 4.2 **Nelnet** \$644.00 7124 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 07/01 Last Active **Nelnet Claims/Bankruptcy** Po Box 82505 When was the debt incurred? 9/20/17 Lincoln, NE 68501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.2 PayPal - Bill me later \$600.00 Last 4 digits of account number 3 Nonpriority Creditor's Name PO Box 105658 When was the debt incurred? Atlanta, GA 30348 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 \$0.00 Santander Consumer USA Last 4 digits of account number Nonpriority Creditor's Name 8585 N Stemmons Fwy, Ste 1100N When was the debt incurred? Dallas, TX 75247 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (if know) Debtor 1 Nicole Willis 4.2 \$8,000.00 **SQUARE CREDIT CARD READER** Last 4 digits of account number 5 Nonpriority Creditor's Name 1455 Market St Ste 600 When was the debt incurred? San Francisco, CA 94103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 Syncb/hhgreg 6057 \$1,447.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 04/15 Last Active Po Box 965060 12/12/17 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Synchrony Bank/TJX 8155 \$157.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/16 Last Active Attn: Bankruptcy Po Box 965060 When was the debt incurred? 9/11/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Charge Account

Page 32 of 64 Case number (if know) Document Debtor 1 Nicole Willis 4.2 **Target** 9549 \$320.00 Last 4 digits of account number 8 Nonpriority Creditor's Name C/O Financial & Retail Srvs Opened 09/15 Last Active Mailstopn BT POB 9475 When was the debt incurred? 12/03/17 Minneapolis, MN 55440 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.2 The Dump \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name 815 Sidney Marcus Blvd NE When was the debt incurred? Atlanta, GA 30324 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Arnold Scott Harris** Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 W. Jackson Ste 400 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **ChexSystems** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 7805 Hudson Rd, Ste 100 Part 2: Creditors with Nonpriority Unsecured Claims Saint Paul, MN 55125 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? City of Chicago Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Mayor Rahm Emanuel ■ Part 2: Creditors with Nonpriority Unsecured Claims 121 N LaSalle, #507

City of Chicago Corporation

Chicago, IL 60602

Name and Address

Official Form 106 F/F

On which entry in Part 1 or Part 2 did you list the original creditor?

☐ Part 1: Creditors with Priority Unsecured Claims

Last 4 digits of account number

Line 4.9 of (Check one):

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Debtor 1 Nicole Willis Counsel Part 2: Creditors with Nonpriority Unsecured Claims Attn: Edward Siskel 30 N LaSalle St, Room 700 Chicago, IL 60602 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? City of Chicago Dept of Law Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Charles King Part 2: Creditors with Nonpriority Unsecured Claims 121 North LaSalle Street, Suite 600 Chicago, IL 60602 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? MCSI Inc Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 7330 College Drive #108 ■ Part 2: Creditors with Nonpriority Unsecured Claims Palos Heights, IL 60463 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Secretary of State Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Safety & Financial Resp Part 2: Creditors with Nonpriority Unsecured Claims 2701 S Dirksen Pkwy

### Part 4: Add the Amounts for Each Type of Unsecured Claim

Springfield, IL 62723

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     | Т  | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total                 |     |   |     |    |             |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 8,095.85    |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 8,095.85    |
|                       |     |   |     | Т  | Total Claim |
|                       | 6f. | Student loans   | 6f. | \$ | 2,926.00    |
| Total claims          |     |   |     |    |             |
| from Part 2           | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00        |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 39,158.18   |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 42,084.18   |

Last 4 digits of account number

|                     |                          | I A A A A A A A A A A A A A A A A A A A | <u> </u>    |  |
|---------------------|--------------------------|---|-------------|--|
| Fill in this infor  | mation to identify your  | case:                                   |             |  |
| Debtor 1            | Nicole Willis            |   |             |  |
|                     | First Name               | Middle Name                             | Last Name   |  |
| Debtor 2            |                          |   |             |  |
| (Spouse if, filing) | First Name               | Middle Name                             | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT                       | OF ILLINOIS |  |
| Case number         |                          |   |             |  |
| (if known)          |                          |   |             |  |
|                     |                          |   |             |  |

### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code |        |       |          | State what the contract or lease is for |
|-----|--|--------|-------|----------|---|
| 2.1 |  |        |       |          |   |
|     | Name   |        |       |          | _                                       |
|     | Number   | Street |       |          |   |
|     | City   |        | State | ZIP Code |   |
| 2.2 |  |        |       |          |   |
|     | Name   |        |       |          |   |
|     | Number   | Street |       |          | _                                       |
|     | City   |        | State | ZIP Code | <del>_</del>                            |
| 2.3 |  |        |       |          |   |
|     | Name   |        |       |          | _                                       |
|     | Number   | Street |       |          | _                                       |
|     | City   |        | State | ZIP Code | <del>_</del>                            |
| 2.4 | •  |        |       |          |   |
|     | Name   |        |       |          | _                                       |
|     | Number   | Street |       |          | _                                       |
|     | City   |        | State | ZIP Code | <del></del>                             |
| 2.5 |  |        |       |          |   |
|     | Name   |        |       |          | _                                       |
|     | Number   | Street |       |          | _                                       |
|     | City   |        | State | ZIP Code | <del>_</del>                            |
|     |  |        |       |          |   |

|                                |  | Docume                        | ent Page 35 d               | )T h4                               |  |
|--------------------------------|--|-------------------------------|-----------------------------|-------------------------------------|--|
| Fill in this i                 | information to identify your                                       |                               |                             |                                     |  |
| Debtor 1                       | Nicole Willis  |                               |                             |                                     |  |
|                                | First Name   | Middle Name                   | Last Name                   |                                     |  |
| Debtor 2<br>(Spouse if, filing | a) First Name  | Middle Name                   | Last Name                   |                                     |  |
|                                |  | NORTHERN DISTRICT             |                             |                                     |  |
| United State                   | es Bankruptcy Court for the:                                       | NORTHERN DISTRICT             | OF ILLINOIS                 |                                     |  |
| Case numb                      | er   |                               |                             |                                     | Charle if this is an   |
| (ii Kilowii)                   |  |                               |                             |                                     | ☐ Check if this is an amended filing                                     |
|                                |  |                               |                             |                                     | 5  |
| Official                       | Form 106H  |                               |                             |                                     |  |
| Sched                          | ule H: Your Cod  | ebtors                        |                             |                                     | 12/15  |
|                                |  |                               |                             |                                     |  |
|                                |  |                               |                             |                                     | ate as possible. If two married needed, copy the Additional Page,        |
| ill it out, an                 | d number the entries in the  | boxes on the left. Attach     | the Additional Page t       |                                     | p of any Additional Pages, write   |
| our name a                     | and case number (if known)   | . Answer every question       | •                           |                                     |  |
| 1. Do y                        | ou have any codebtors? (If   | you are filing a joint case,  | do not list either spouse   | as a codebtor.                      |  |
| ■ No                           |  |                               |                             |                                     |  |
| ☐ Yes                          |  |                               |                             |                                     |  |
| 2 11/14h                       | in the last 9 years, have you                                      | , lived in a community or     | concrety state or torritory | n.2 (Community proport              | try atatag and tarritarias include                                       |
|                                | in the last 8 years, nave you<br>a, California, Idaho, Louisiana,  |                               |                             |                                     | y states and territories include   |
| _                              |  |                               |                             |                                     |  |
|                                | Go to line 3.  |                               |                             |                                     |  |
| ⊔ Yes.                         | Did your spouse, former spou                                       | use, or legal equivalent live | e with you at the time?     |                                     |  |
|                                |  |                               |                             |                                     |  |
|                                |  |                               |                             |                                     | g with you. List the person shown<br>he creditor on Schedule D (Official |
| Form 1                         | 06D), Schedule E/F (Official                                       |                               |                             |                                     | Schedule E/F, or Schedule G to fill                                      |
| out Co                         | lumn 2.  |                               |                             |                                     |  |
|                                | Column 1: Your codebtor<br>ame, Number, Street, City, State and Zi | IP Code                       |                             |                                     | editor to whom you owe the debt  |
|                                | arrio, rearribor, otroot, only, otato and zi                       | 1 0000                        |                             | Check all schedule                  | еѕ шатарру.  |
| 3.1                            |  |                               |                             | Schedule D, lin                     | e  |
| N                              | lame   |                               |                             | Schedule E/F, I                     |  |
|                                |  |                               |                             | ☐ Schedule G, lin                   | ne   |
|                                | lumber Street  | 2                             | 710.0                       | <del>_</del>                        |  |
| C                              | City   | State                         | ZIP Code                    |                                     |  |
| 3.2                            |  |                               |                             | Och adula D. P.                     | •  |
|                                | lame   |                               |                             | □ Schedule D, lin □ Schedule E/F, l |  |
|                                |  |                               |                             | ☐ Schedule G, lin                   |  |
| -N                             | lumber Street  |                               |                             |                                     |  |
|                                | Sity   | State                         | ZIP Code                    |                                     |  |

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| Fill  | in this information t   | o identify your c                                  | ase:   |   |             |      |  |                               |                          |                             |          |  |
|---|---|--|--|---|-------------|------|--|-------------------------------|--------------------------|-----------------------------|----------|--|
| De  | btor 1  | Nicole Willis                                      |  |   |             | _    |  |                               |                          |                             |          |  |
| Debtor 2 (Spouse, if filing)                                |   |  |  |   | _           |      |  |                               |                          |                             |          |  |
| Un  | ited States Bankrup   | tcy Court for the                                  | : NORTHERN DISTRIC   | CT OF ILLINOIS                                |             |      |  |                               |                          |                             |          |  |
| Case number (If known)                                      |   |  |  |   |             |      | Check if this is:  An amended filing A supplement showing postpetition chapter 13 income as of the following date: |                               |                          |                             |          |  |
| 0   | fficial Form  | <u> 1061</u>                                       |  |   |             |      | N  | /IM / DD/ \                   | YYYY                     |                             |          |  |
| S   | chedule I: `  | Your Inc   | ome  |   |             |      |  |                               |                          |                             | 12/1     |  |
| spo   | ouse. If you are sep<br>ich a separate shee   | parated and you<br>tet to this form.<br>Employment | are married and not filing wing spouse is not filing wing wing the top of any additi | ith you, do not inclu<br>onal pages, write yo | de infor    | mati | on abou  | t your spo<br>umber (if       | ouse. If mo<br>known). A | ore space is<br>nswer every | needed,  |  |
| •   | information.  | -,   |  | Debtor 1                                      |             |      |  | Debtor 2 or non-filing spouse |                          |                             |          |  |
|   | If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work. |  | Employment status  | ■ Employed □ Not employed                     |             |      |  | ☐ Employed ☐ Not employed     |                          |                             |          |  |
|   |   |  | Occupation   | Self Employed/hair                            |             |      |  |                               |                          |                             |          |  |
|   |   |  | Employer's name  |   |             |      |  |                               |                          |                             |          |  |
| Occupation may include student or homemaker, if it applies. |   |  | Employer's address   |   |             |      |  |                               |                          |                             |          |  |
|   |   |  | How long employed to   | here?   |             |      |  | _                             |                          |                             |          |  |
| Pa  | rt 2: Give De   | tails About Mor                                    | nthly Income   |   |             |      |  |                               |                          |                             |          |  |
|   | imate monthly incouse unless you are  |  | ate you file this form. If   | you have nothing to r                         | eport for   | any  | line, write  | e \$0 in the                  | space. Inc               | clude your no               | n-filing |  |
|   | ou or your non-filing<br>re space, attach a se  |  | ore than one employer, co  | ombine the informatio                         | n for all e | empl | oyers for  | that perso                    | on on the lir            | nes below. If               | you need |  |
|   |   |  |  |   |             |      | For Del  | btor 1                        |                          | otor 2 or<br>ng spouse      |          |  |
| 2.  | <b>List monthly gross wages, salary, and commissions</b> (bef deductions). If not paid monthly, calculate what the monthly                              |  |  |   | 2.          | \$   |  | 0.00                          | \$                       | N/A                         | -        |  |
| 3.  | Estimate and list monthly overtime pay.   |  |  |   | 3.          | +\$  |  | 0.00                          | +\$                      | N/A                         |          |  |
| 4.  | Calculate gross Income. Add line 2 + line 3.  |  |  |   | 4.          | \$   |  | 0.00                          | \$                       | N/A                         |          |  |

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| Deb | tor 1                      | Nicole Willis   | -     | C          | ase        | number (if known) |      |                    |                |                  |
|-----|----------------------------|---|-------|------------|------------|-------------------|------|--------------------|----------------|------------------|
|     |                            |   |       |            | For        | Debtor 1          |      | Debtor<br>filing s | 2 or<br>pouse  |                  |
|     | Cop                        | by line 4 here  | 4.    |            | \$         | 0.00              | \$   |                    | N/A            | _                |
| 5.  | List                       | all payroll deductions:   |       |            |            |                   |      |                    |                |                  |
|     | 5a.                        | Tax, Medicare, and Social Security deductions   | 5a    | ı.         | \$         | 0.00              | \$   |                    | N/A            |                  |
|     | 5b.                        | Mandatory contributions for retirement plans  | 5b    |            | <u>,</u> — | 0.00              | \$   |                    | N/A            | _                |
|     | 5c.                        | Voluntary contributions for retirement plans  | 5c    | <b>;</b> . | \$         | 0.00              | \$   |                    | N/A            |                  |
|     | 5d.                        | Required repayments of retirement fund loans  | 5d    | l.         | \$         | 0.00              | \$   |                    | N/A            | _                |
|     | 5e.                        | Insurance   | 5e    | <b>)</b> . | \$_        | 0.00              | \$   |                    | N/A            |                  |
|     | 5f.                        | Domestic support obligations  | 5f.   |            | \$_        | 0.00              | \$   |                    | N/A            | _                |
|     | 5g.                        | Union dues  | 5g    |            | \$_        | 0.00              | \$   |                    | N/A            | _                |
|     | 5h.                        | Other deductions. Specify:  | _ 5h  | 1.+        | \$         | 0.00              | + \$ |                    | N/A            | _                |
| 6.  | Add                        | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.    |            | \$_        | 0.00              | \$   |                    | N/A            | _                |
| 7.  | Cal                        | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.    |            | \$         | 0.00              | \$   |                    | N/A            | _                |
| 8.  | List<br>8a.                | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a    | ١.         | \$         | 4,025.00          | \$   |                    | N/A            |                  |
|     | 8b.                        | Interest and dividends  | 8b    | ).         | \$_        | 0.00              | \$   |                    | N/A            | _                |
|     | 8c.                        | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 80    | <b>:</b> . | \$         | 0.00              | \$   |                    | N/A            |                  |
|     | 8d.                        | Unemployment compensation   | 8d    | l.         | \$         | 0.00              | \$   |                    | N/A            | _                |
|     | 8e.                        | Social Security   | 8e    | <b>)</b> . | \$         | 0.00              | \$   |                    | N/A            | _                |
|     | 8f.                        | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:         | 8f.   |            | \$_        | 0.00              | \$   |                    | N/A            | _                |
|     | 8g.<br>8h.                 | Pension or retirement income  | 8g    |            | \$_        | 0.00              | —    |                    | N/A<br>N/A     | _                |
|     | OII.                       | Other monthly income. Specify:  | _ 011 | ı.+<br>—   | <b>Ф</b> _ | 0.00              | - J  |                    | N/A            | _                |
| 9.  | Add                        | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.    | \$         |            | 4,025.00          | \$   |                    | N/             | 4                |
| 10  | Cal                        | culate monthly income. Add line 7 + line 9.   | 10.   | \$         |            | 4,025.00 + \$     |      | N/A                | = \$           | 4,025.00         |
|     |                            | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |       | *-         |            | 4,023.00          |      | 14/7               | -              | 4,020.00         |
| 11. | Star<br>Incl<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:      | depe  |            | ,          |                   | •    | chedule<br>11.     |                | 0.00             |
| 12. |                            | If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certainlies   |       |            |            |                   |      | 12.                | \$             | 4,025.00         |
| 13. | Do                         | you expect an increase or decrease within the year after you file this form   | ?     |            |            |                   |      | ·                  | Combi<br>month | ned<br>ly income |
|     |                            | No.   |       |            |            |                   |      |                    |                |                  |
|     |                            | Voc Explain:  |       |            |            |                   |      |                    |                | l l              |

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| Fill | in this information to identify y  | our case:      |  |  | l               |   |   |
|------|--|----------------|--|--|-----------------|---|---|
| Deb  | otor 1 Nicole Willis   | 3              |  |  | Ched            | ck if this is:  |   |
|      | otor 2 ouse, if filing)  |                |  |  |                 | An amended filing<br>A supplement show<br>13 expenses as of | ving postpetition chapter the following date: |
| Unit | ted States Bankruptcy Court for the  | e: NORTH       | HERN DISTRICT OF ILLING                      | OIS                                    | -               | MM / DD / YYYY  |   |
|      | se number  |                |  |  |                 |   |   |
|      | (nown)   |                |  |  |                 |   |   |
|      | fficial Form 106J  |                |  |  |                 |   |   |
|      | chedule J: Your  |                |  |  |                 |   | 12/15   |
| info | as complete and accurate a<br>ormation. If more space is no<br>mber (if known). Answer eve         | eded, atta     | ch another sheet to this                     |  |                 |   |   |
| Par  | Describe Your Hous Is this a joint case?   | ehold          |  |  |                 |   |   |
| ١.   | ■ No. Go to line 2.  |                |  |  |                 |   |   |
|      | Yes. Does Debtor 2 live  | in a separ     | ate household?                               |  |                 |   |   |
|      | □ No   |                |  |  |                 |   |   |
|      | ☐ Yes. Debtor 2 mu   | st file Offici | al Form 106J-2, Expenses                     | for Separate House                     | ehold of Deb    | tor 2.  |   |
| 2.   | Do you have dependents?  | ☐ No           |  |  |                 |   |   |
|      | Do not list Debtor 1 and Debtor 2.   | ■ Yes.         | Fill out this information for each dependent | Dependent's relat<br>Debtor 1 or Debto |                 | Dependent's age   | Does dependent live with you?                 |
|      | Do not state the   |                |  |  |                 |   | □ No  |
|      | dependents names.  |                |  | Child                                  |                 |   | ■ Yes   |
|      |  |                |  |  |                 |   | □ No<br>□ Yes                                 |
|      |  |                |  | -                                      |                 |   | □ No  |
|      |  |                |  |  |                 |   | ☐ Yes   |
|      |  |                |  |  |                 |   | □ No  |
| 3.   | Do your expenses include   | _              |  |  |                 |   | ☐ Yes   |
| Э.   | expenses of people other<br>yourself and your depende  | than 👝         | No<br>Yes                                    |  |                 |   |   |
| Par  | t 2: Estimate Your Ongo  | ing Month      | ly Expenses                                  |  |                 |   |   |
| exp  | timate your expenses as of your expenses as of your expenses as of a date after the olicable date. |                |  |  |                 |   |   |
| Inc  | lude expenses paid for with  | non-cash       | government assistance it                     | you know                               |                 |   |   |
|      | value of such assistance ar<br>ficial Form 106I.)  | nd have inc    | cluded it on Schedule I: Y                   | our Income                             |                 | Your exp  | enses   |
| 4.   | The rental or home owners payments and any rent for the  |                |  | nclude first mortgag                   | e<br>4. \$      | S   | 2,200.00                                      |
|      | If not included in line 4:   |                |  |  |                 |   |   |
|      | 4a. Real estate taxes  |                |  |  | 4a. \$          | 3   | 0.00  |
|      | 4b. Property, homeowner  |                |  |  | 4b. \$          |   | 0.00  |
|      | 4c. Home maintenance, r  |                |  |  | 4c. \$          |   | 0.00  |
| 5.   | 4d. Homeowner's associa  Additional mortgage paym  |                |  | me equity loans                        | 4d. \$<br>5. \$ |   | 0.00  |

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| Debtor 1                                    |         | Nicole W       | Nicole Willis   |                                   |                               |             |                               |
|---|---------|----------------|---|-----------------------------------|-------------------------------|-------------|-------------------------------|
| 6.  | Utiliti | ies:           |   |                                   |                               |             |                               |
|   | 6a.     |                | neat, natural gas                                       |                                   | 6a.                           | \$          | 260.00                        |
|   | 6b.     | •              | er, garbage collection                                  |                                   | 6b.                           | \$          | 0.00                          |
|   | 6c.     |                | cell phone, Internet, satellite, and o                  | able services                     | 6c.                           | \$          | 218.00                        |
|   | 6d.     | Other. Spe     | cify:   |                                   | 6d.                           | \$          | 0.00                          |
| 7.  | Food    | and house      | keeping supplies  |                                   |                               | \$          | 250.00                        |
| 8.  |         |                | ildren's education costs                                |                                   | 8.                            | \$          | 0.00                          |
| 9.  |         |                | y, and dry cleaning                                     |                                   | 9.                            | \$          | 10.00                         |
| 10.   |         | •              | oducts and services                                     |                                   | 10.                           | \$          | 10.00                         |
|   |         | -              | tal expenses  |                                   | 11.                           | ·           | 10.00                         |
|   |         |                | nclude gas, maintenance, bus or tra                     | nin fare.                         |                               | · ———       |                               |
|   |         | ot include ca  |   |                                   | 12.                           | \$          | 250.00                        |
| 13.   | Enter   | rtainment, c   | lubs, recreation, newspapers, ma                        | gazines, and books                | 13.                           | \$          | 0.00                          |
| 14.   | Chari   | itable contr   | butions and religious donations                         |                                   | 14.                           | \$          | 0.00                          |
| 15.   | Insur   | rance.         |   |                                   |                               | -           |                               |
|   |         |                | surance deducted from your pay or i                     | ncluded in lines 4 or 20.         |                               |             |                               |
|   | 15a.    | Life insurar   | ice   |                                   | 15a.                          | *           | 0.00                          |
|   | 15b.    | Health insu    | rance   |                                   | 15b.                          | \$          | 0.00                          |
|   | 15c.    | Vehicle ins    | urance  |                                   | 15c.                          | \$          | 225.00                        |
|   | 15d.    | Other insur    | ance. Specify:  |                                   | 15d.                          | \$          | 0.00                          |
| 16.   |         |                | lude taxes deducted from your pay                       | or included in lines 4 or 20.     |                               |             |                               |
|   | Speci   | ·              |   |                                   | 16.                           | \$          | 0.00                          |
| 17.   |         |                | ase payments:   |                                   |                               |             |                               |
|   |         |                | nts for Vehicle 1                                       |                                   | 17a.                          | · .         | 590.00                        |
|   |         |                | nts for Vehicle 2                                       |                                   | 17b.                          | ·           | 0.00                          |
|   |         | Other. Spe     | -   |                                   | 17c.                          | \$          | 0.00                          |
|   |         | Other. Spe     |   |                                   | 17d.                          | \$          | 0.00                          |
| 18.   |         |                | of alimony, maintenance, and sup                        |                                   | 40                            | ф           | 0.00                          |
| 40  |         |                | our pay on line 5, Schedule I, You                      |                                   | 18.                           | <b>D</b>    |                               |
| 19.   |         |                | you make to support others who                          | do not live with you.             | 40                            | <b>&gt;</b> | 0.00                          |
| 00  | Speci   | ,              | uto average and included in line.                       | A an E of this farms on an Cabas  | 19.                           |             |                               |
| 20.   |         |                | rty expenses not included in lines<br>on other property | s 4 or 5 or this form or on Sched | 20a.                          |             | 0.00                          |
|   |         | Real estate    |   |                                   | 20a.<br>20b.                  | ·           | 0.00                          |
|   |         |                |   |                                   | 20b.<br>20c.                  | ·           |                               |
|   |         |                | omeowner's, or renter's insurance                       |                                   | 20d.                          |             | 0.00                          |
|   |         |                | e, repair, and upkeep expenses                          | _                                 | 20d.<br>20e.                  |             | 0.00                          |
| 0.4   |         |                | r's association or condominium due                      | S                                 |                               | ·           | 0.00                          |
| 21.   | Otne    | er: Specify:   |   |                                   | 21.                           | +\$         | 0.00                          |
| 22.   | Calcu   | ulate your n   | onthly expenses   |                                   |                               |             |                               |
|   |         | Add lines 4 t  |   |                                   |                               | \$          | 4,023.00                      |
|   |         |                | (monthly expenses for Debtor 2), if                     | any, from Official Form 106J-2    |                               | \$          |                               |
|   |         |                | and 22b. The result is your monthly                     |                                   |                               | \$          | 4,023.00                      |
|   | 220.7   | riad iirie ZZa | and 225. The result is your month                       | y expenses.                       |                               | Ι Ψ         | 4,023.00                      |
| 23.   |         | •              | onthly net income.                                      |                                   |                               |             |                               |
|   | 23a.    | Copy line 1    | 2 (your combined monthly income)                        | from Schedule I.                  | 23a.                          | \$          | 4,025.00                      |
|   | 23b.    | Copy your      | monthly expenses from line 22c abo                      | ve.                               | 23b.                          | -\$         | 4,023.00                      |
|   |         |                |   |                                   |                               |             |                               |
|   | 23c.    |                | ur monthly expenses from your mor                       | nthly income.                     | 00-                           |             | 2.00                          |
|   |         | The result i   | s your <i>monthly net income</i> .                      |                                   | 23c.                          | \$          | 2.00                          |
| 24  | De      | all avecet -   | o ingresse or decrease in very                          | noncoo within the year ofter      | ı filo 4h!-                   | form?       |                               |
| ∠4.   |         |                | n increase or decrease in your ex                       |                                   |                               |             | ease or decrease because of a |
| modification to the terms of your mortgage? |         |                |   |                                   | sact of decrease because of a |             |                               |
|   | ■ No    |                |   |                                   |                               |             |                               |
|   | Пу      |                | Explain here:   |                                   |                               |             |                               |

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| Fill in this infor                  | mation to identify your                           | case:                     |                         |                          |  |
|-------------------------------------|---|---------------------------|-------------------------|--------------------------|--|
| Debtor 1                            | Nicole Willis                                     |                           |                         |                          |  |
|                                     | First Name  | Middle Name               | Last Name               |                          |  |
| Debtor 2<br>(Spouse if, filing)     | First Name  | Middle Name               | Last Name               |                          |  |
| United States Ba                    | ankruptcy Court for the:                          | NORTHERN DISTRICT         | OF ILLINOIS             |                          |  |
| Case number (if known)              |   |                           |                         |                          | ☐ Check if this is an amended filing                                     |
| Official Form                       | m 106Dec  |                           |                         |                          |  |
| Declarat                            | tion About a                                      | an Individual             | Debtor's So             | chedules                 | 12/15  |
| obtaining mone<br>years, or both. 1 |   | n connection with a bankr |                         |                          | ment, concealing property, or<br>0, or imprisonment for up to 20         |
| Did you pa                          | y or agree to pay some                            | eone who is NOT an attorn | ey to help you fill out | bankruptcy forms?        |  |
| ■ No                                |   |                           |                         |                          |  |
| ☐ Yes. I                            | Name of person                                    |                           |                         |                          | cruptcy Petition Preparer's Notice,<br>and Signature (Official Form 119) |
|                                     | alty of perjury, I declare<br>e true and correct. | that I have read the sumn | nary and schedules fil  | led with this declaratio | n and  |
| X /s/ Nic                           | ole Willis  |                           | X                       |                          |  |
| Nicole                              |   |                           | Signature o             | of Debtor 2              |  |

Date \_\_\_\_\_

Date April 24, 2018

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|                    | to the to com                                 |  |  |   |   |   |
|--------------------|---|--|--|---|---|---|
|                    | otor 1  | nation to identify you                       | r case:  |   |   |   |
| Der                | וסוטו ו                                       | Nicole Willis First Name                     | Middle Name  | Last Name   |   |   |
|                    | otor 2<br>use if, filing)                     | First Name                                   | Middle Name  | Last Name   |   |   |
| ` '                |   | nkruptcy Court for the:                      | NORTHERN DISTRICT O  | OF ILLINOIS   |   |   |
|                    |   | intropiety Court for the.                    | - NORTHERN BIOTHER   | or illustration                                       |   |   |
| 1                  | se number                                     |  |  |   | _   | Check if this is an amended filing                    |
|                    | ficial Fo                                     |  | Affairs for Individ  | duals Filing for B                                    | ankruptcy   | 4/10  |
| info               | rmation. If m                                 | ore space is needed,<br>n). Answer every que | attach a separate sheet to   | this form. On the top of any                          | equally responsible for sup<br>additional pages, write you    |   |
| Par                |   |  |  | Lived Belole  |   |   |
| 1.                 | _   | r current marital statu                      | 15 ?   |   |   |   |
|                    | <ul><li>✓ Married</li><li>✓ Not mar</li></ul> | ried   |  |   |   |   |
| •                  |   |  | lived annual and ath on the co   | ude and view live in avio                             |   |   |
| 2.                 | _ During the is                               | ast 3 years, nave you                        | lived anywhere other than  | wnere you live now?                                   |   |   |
|                    | □ No ■ Yes Lie                                | t all of the places you l                    | ived in the last 3 years. Do no  | ot include where you live now                         |   |   |
|                    |   | , ,  | ·  | •   |   |   |
|                    | Debtor 1 Pr                                   | ior Address:                                 | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | dress:  | Dates Debtor 2<br>lived there                         |
|                    | 10923 S Po<br>Chicago, I                      |  | From-To:<br><b>Until 7/16</b>  | ☐ Same as Debtor                                      |   | ☐ Same as Debtor 1 From-To:                           |
| <b>3.</b><br>state | es and territori                              | es include Arizona, Ca                       |  | vada, New Mexico, Puerto R                            | ity property state or territor<br>co, Texas, Washington and V |   |
| Par                | t 2 Explai                                    | n the Sources of You                         | r Income   |   |   |   |
| 4.                 | Fill in the total                             | al amount of income yo                       | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including part-                       |   | ndar years?   |
|                    |   | in the details.                              |  |   |   |   |
|                    |   |  | Debtor 1   |   | Debtor 2  |   |
|                    |   |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                    | Gross income<br>(before deductions<br>and exclusions) |
|                    |   | of current year until<br>d for bankruptcy:   | ☐ Wages, commissions, bonuses, tips  | \$18,000.00   | ☐ Wages, commissions, bonuses, tips                           |   |
|                    |   |  | Operating a business   |   | ☐ Operating a business  |   |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Document Page 42 of 64 ase number (if known) Debtor 1 **Nicole Willis** Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$120,733.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$140,000.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address  | Dates of payment | Total amount paid | Amount you still owe | Was this payment for   |
|--|------------------|-------------------|----------------------|--|
| Ally Financial<br>Attn: Bankruptcy<br>Po Box 380901<br>Bloomington, MN 55438 |                  | \$1,500.00        | \$20,774.00          | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other |

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Case number (if known) Document Debtor 1 Nicole Willis

|     | Creditaria Nama and Address   | Dates of navment  | Total amount                                    | A manuat wan                                 | Was this no   | mant far   |
|-----|---|---|---|--|---|--|
|     | Creditor's Name and Address   | Dates of payment  | Total amount paid                               | Amount you still owe                         | Was this pa   | inent for  |
|     | BMO Harris Bank N.A.<br>111 W. Monroe St., Floor 21E<br>Chicago, IL 60603-4096  |   | \$6,600.00                                      | \$268,000.00                                 | ■ Mortgage □ Car □ Credit Ca □ Loan Rep □ Suppliers | ayment   |
|     |   |   |   |  | Other   |  |
| 7.  | Within 1 year before you filed for bankrupt Insiders include your relatives; any general prof which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any gen<br>control, or owner of 20% o | eral partners; partner<br>r more of their votin | erships of which you<br>g securities; and ar | u are a genera<br>ny managing a                     | partner; corporations<br>gent, including one for |
|     | No  |   |   |  |   |  |
|     | Yes. List all payments to an insider.   |   |   |  |   |  |
|     | Insider's Name and Address  | Dates of payment  | Total amount paid                               | Amount you still owe                         | Reason for  | his payment                                      |
| 8.  | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  |   |   | any property on ac                           | count of a de                                       | bt that benefited an                             |
|     | No  |   |   |  |   |  |
|     | Yes. List all payments to an insider  Insider's Name and Address  | Dates of navment  | Total amount                                    | Amount you                                   | Posson for  | his navment                                      |
|     | insider's Name and Address  | Dates of payment  | Total amount paid                               | Amount you still owe                         | Include credi                                       | this payment<br>tor's name                       |
| Par | 4: Identify Legal Actions, Repossession   | ns. and Foreclosures  |   |  |   |  |
| 9.  | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.                                    |   | s, divorces, collectic                          | on suits, paternity a                        | ctions, support                                     | or custody                                       |
|     | Case title Case number  | Nature of the case  | Court or agency                                 |  | Status of the                                       | e case   |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.   |   | erty repossessed, f                             | oreclosed, garnis                            | hed, attached                                       | , seized, or levied?                             |
|     | Creditor Name and Address   | Describe the Property                                       |   | Date   |   | Value of the                                     |
|     |   | Explain what happened                                       | d   |  |   | property   |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec  No Yes. Fill in the details.  |   | luding a bank or fi                             | nancial institution                          | , set off any a                                     | mounts from your                                 |
|     | Creditor Name and Address   | Describe the action the                                     | creditor took                                   |  | action was  | Amount   |
|     |   |   |   | taken  |   |  |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes   |   | erty in the possess                             | ion of an assigned                           | e for the bene                                      | fit of creditors, a                              |

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| Par | t 5: List Certain Gifts and Contribution  | s                 |   |   |                           |
|-----|---|-------------------|---|---|---------------------------|
| 13. | Within 2 years before you filed for bankro  No  Yes. Fill in the details for each gift.   | uptcy,            | did you give any gifts with a total value of more t   | han \$600 per person                    | ?                         |
|     | Gifts with a total value of more than \$600 per person  |                   | Describe the gifts  | Dates you gave the gifts                | Value                     |
|     | Person to Whom You Gave the Gift and Address:   |                   |   |   |                           |
| 14. | Within 2 years before you filed for bankro  No  Yes. Fill in the details for each gift or co  |                   | did you give any gifts or contributions with a totation   | al value of more than                   | \$600 to any charity?     |
|     | Gifts or contributions to charities that to<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code | otal              | Describe what you contributed   | Dates you contributed                   | Value                     |
| Par | t 6: List Certain Losses  |                   |   |   |                           |
| 15. | Within 1 year before you filed for bankrup or gambling?  No Yes. Fill in the details.   | otcy o            | r since you filed for bankruptcy, did you lose any  | thing because of the                    | ft, fire, other disaster, |
|     | Describe the property you lost and how the loss occurred  | Date of your loss | Value of property lost  |   |                           |
| Par | t 7: List Certain Payments or Transfers   | i                 |   |   |                           |
| 16. | consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition p   | repari            | lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services require |   | rty to anyone you         |
|     | ☐ No ☐ Yes. Fill in the details.  |                   |   |   |                           |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not Y                                   | ou                | Description and value of any property transferred   | Date payment<br>or transfer was<br>made | Amount of payment         |
|     | Gleason & Gleason LLC<br>77 W. Washington, Ste 1218<br>Chicago, IL 60602<br>http://chilawyers.com                                     |                   |   | 2018                                    | \$637.50                  |
|     | Summit Financial Education Inc<br>4800 E Flower St<br>Tucson, AZ 85712  |                   | Credit Counseling   | 2017                                    | \$14.95                   |
| 17. | Within 1 year before you filed for bankrupromised to help you deal with your cred Do not include any payment or transfer that         | litors o          |   | or transfer any prope                   | rty to anyone who         |
|     | □ No ■ Yes. Fill in the details.  |                   |   |   |                           |
|     | Person Who Was Paid<br>Address  |                   | Description and value of any property transferred   | Date payment or transfer was made       | Amount of payment         |

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Debtor 1 Nicole Willis

|     | Person Who Was Paid<br>Address  | Description and v transferred  | Description and value of any property transferred |                              |  | Amount of payment                             |
|-----|---|--|---|------------------------------|--|---|
|     | Lexington Law<br>PO Box 510290<br>Salt Lake City, UT 84151  |  |   |                              | 1 year   | \$1,188.00                                    |
|     | Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already | iness or financial affa<br>e as security (such as t                      | nirs?<br>he granting of a                         |                              |  |   |
|     | ■ No □ Yes. Fill in the details.  |  |   |                              |  |   |
|     | Person Who Received Transfer<br>Address   | Description and v property transferr                                     |   | payment                      | e any property or<br>s received or debts<br>exchange       | Date transfer was made                        |
|     | Person's relationship to you  |  |   | <b>P</b>                     |  |   |
|     | Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No Yes. Fill in the details.   |  | y property to a                                   | self-settled t               | rust or similar device o                                   | of which you are a                            |
|     | Name of trust   | Description and v  | alue of the pro                                   | perty transfe                | rred   | Date Transfer was made                        |
|     |   |  |   |                              |  | maue  |
| 20. | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No                       | were any financial ac  | counts or instru                                  | uments held<br>of deposit; s |  |   |
|     | Yes. Fill in the details.   |  |   |                              |  |   |
|     |   | ast 4 digits of account number   | Type of accou                                     | c<br>m                       | ate account was<br>losed, sold,<br>noved, or<br>ransferred | Last balance<br>before closing or<br>transfer |
|     | Do you now have, or did you have within 1 yearsh, or other valuables?   | ar before you filed for  | bankruptcy, ar                                    | ny safe depos                | sit box or other deposi                                    | tory for securities,                          |
|     | <ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>  |  |   |                              |  |   |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)            |   | Describe the                 | e contents   | Do you still have it?                         |
|     | Storage   |  |   | Household                    | l Goods  | □ No<br>■ Yes                                 |
| 22. | Have you stored property in a storage unit or   | place other than your  | home within 1                                     | year before y                | ou filed for bankruptc                                     | y?  |
|     | ■ No  |  |   |                              |  |   |
|     | Yes. Fill in the details.   |  |   | _                            |  | _   |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or h<br>to it?<br>Address (Number, S<br>State and ZIP Code) |   | Describe the                 | e contents   | Do you still have it?                         |

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Debtor 1 Nicole Willis

| Par | t 9: Identify Property You Hold or Control for   | Someone Else   |                                      |                       |  |  |  |  |  |
|-----|--|--|--------------------------------------|-----------------------|--|--|--|--|--|
| 23. | Do you hold or control any property that someo for someone.  | ne else owns? Include any proper   | ty you borrowed from, are storing fo | r, or hold in trust   |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                                      |                       |  |  |  |  |  |
|     | Owner's Name  Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Code)  Describe the property  Value |  |                                      |                       |  |  |  |  |  |
| Par | t 10: Give Details About Environmental Informa   | ation  |                                      |                       |  |  |  |  |  |
| For | the purpose of Part 10, the following definitions  | apply:   |                                      |                       |  |  |  |  |  |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the arregulations controlling the cleanup of these substances.                 | ir, land, soil, surface water, ground                                      |                                      |                       |  |  |  |  |  |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposal   | •  | law, whether you now own, operate,   | or utilize it or used |  |  |  |  |  |
|     | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s  |  | s waste, hazardous substance, toxic  | substance,            |  |  |  |  |  |
| Rep | ort all notices, releases, and proceedings that yo   | ou know about, regardless of wher  | they occurred.                       |                       |  |  |  |  |  |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?                                       |  |                                      |                       |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                                      |                       |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it    | Date of notice        |  |  |  |  |  |
| 25. | Have you notified any governmental unit of any release of hazardous material?  |  |                                      |                       |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                                      |                       |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it    | Date of notice        |  |  |  |  |  |
| 26. | Have you been a party in any judicial or adminis   | strative proceeding under any envi   | ronmental law? Include settlements   | and orders.           |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                                      |                       |  |  |  |  |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case                   | Status of the case    |  |  |  |  |  |
| Par | t11: Give Details About Your Business or Con   | nections to Any Business   |                                      |                       |  |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy, o  | did you own a business or have an  | y of the following connections to an | y business?           |  |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in a t  | rade, profession, or other activity,                                       | either full-time or part-time        |                       |  |  |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |                                      |                       |  |  |  |  |  |
|     | ☐ A partner in a partnership   |  |                                      |                       |  |  |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation   |  |                                      |                       |  |  |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |  |                                      |                       |  |  |  |  |  |

Case 18-11989 Doc 1 Filed 04/24/18 Entered 04/24/18 17:44:55 Page 47 of 64 Case number (if known) Document Debtor 1 **Nicole Willis** ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: Weavology 38-3888109 From-To Until December 2016 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Nicole Willis Signature of Debtor 2 **Nicole Willis** Signature of Debtor 1 **Date** Date April 24, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

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| Fill in this infor        | rmation to identify your        | case:                |  |   |
|---------------------------|---------------------------------|----------------------|--|---|
| Debtor 1                  | Nicole Willis                   |                      |  |   |
| Debtor 2                  | First Name                      | Middle Name          | Last Name  |   |
| (Spouse if, filing)       | First Name                      | Middle Name          | Last Name  | —   |
| United States B           | ankruptcy Court for the:        | NORTHERN DIS         | TRICT OF ILLINOIS  |   |
| Case number               |                                 |                      |  |   |
| (if known)                |                                 |                      |  | ☐ Check if this is an amended filing                          |
| Official Fo               |                                 | on for Indiv         | viduals Filing Under Ch  | apter 7 12/15   |
|                           | dividual filing under cha       |                      | ll out this form if:   |   |
| _                         | ve claims secured by yo         |                      | at assistant   |   |
| You must file th          | ever is earlier, unless t       | within 30 days after | you file your bankruptcy petition or by the e time for cause. You must also send copid   |   |
| sign a                    | and date the form.              | •                    | oth are equally responsible for supplying co   |   |
|                           | your name and case nu           |                      | s needed, attach a separate sheet to this io   | mi. On the top of any additional pages,                       |
| Part 1: List Y            | our Creditors Who Hav           | ve Secured Claims    |  |   |
|                           |                                 | Part 1 of Schedule D | : Creditors Who Have Claims Secured by F   | Property (Official Form 106D), fill in the                    |
| information b             | pelow. reditor and the property | that is collateral   | What do you intend to do with the prope secures a debt?                                  | Prty that Did you claim the property as exempt on Schedule C? |
| One distanta              | A.II. =                         |                      |  | _   |
| Creditor's name:          | Ally Financial                  |                      | <ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul> | □ No  |
|                           | ( 0040 V.I . VO00               |                      | Retain the property and redeem it.   | ■ Yes   |
|                           | f 2016 Volvo XC60               |                      | Reaffirmation Agreement.   |   |
| property<br>securing debt | t:                              |                      | ☐ Retain the property and [explain]:   |   |
|                           |                                 |                      |  |   |
| Creditor's                | Chase Auto Finance              |                      | ■ Surrender the property.  | ■ No  |

Official Form 108

property

Creditor's

name:

property

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 $\square$  Surrender the property.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Description of 2013 Mini Cooper

**Home Furnish** 

Description of Sectional sofa

☐ Yes

■ No

☐ Yes

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| Debtor 1      | Nicole Willis  | Case number (if known)   |                                 |
|---------------|--|--|---------------------------------|
| securin       | ng debt:   |  |                                 |
| Part 2:       | List Your Unexpired Personal Property Leases   |  |                                 |
| For any u     | nexpired personal property lease that you listed<br>ormation below. Do not list real estate leases. Ur | in Schedule G: Executory Contracts and Unexpired Leases (Official Fonexpired leases are leases that are still in effect; the lease period has not the trustee does not assume it. 11 U.S.C. § 365(p)(2). | rm 106G), fill<br>ot yet ended. |
| Describe      | your unexpired personal property leases  | Will the lease be as   | sumed?                          |
| Lessor's r    |  | □ No   |                                 |
| Property:     | on of leased   | ☐ Yes  |                                 |
| Lessor's r    | name:<br>on of leased  | □ No   |                                 |
| Property:     |  | ☐ Yes  |                                 |
| Lessor's name |  | □ No   |                                 |
| Property:     |  | ☐ Yes  |                                 |
| Lessor's r    | name:<br>on of leased  | □ No   |                                 |
| Property:     |  | ☐ Yes  |                                 |
| Lessor's r    | name:<br>on of leased  | □ No   |                                 |
| Property:     |  | ☐ Yes  |                                 |
| Lessor's r    | name:<br>on of leased  | □ No   |                                 |
| Property:     |  | ☐ Yes  |                                 |
| Lessor's r    | name:<br>on of leased  | □ No   |                                 |
| Property:     |  | ☐ Yes  |                                 |
|               |  |  |                                 |

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| Deb  | otor 1 Nicole Willis                         | Case number (if known)  |
|------|--|---|
|      |  |   |
|      |  |   |
|      |  |   |
|      |  |   |
| Part | t 3: Sign Below                              |   |
| orop | perty that is subject to an unexpired lease. | ted my intention about any property of my estate that secures a debt and any personal |
| X    | /s/ Nicole Willis                            | X   |
|      | Nicole Willis                                | Signature of Debtor 2   |
|      | Signature of Debtor 1                        |   |
|      | Date April 24, 2018                          | Date  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter | 7:    | Liquidation        |
|---------|-------|--------------------|
| ;       | \$245 | filing fee         |
|         | \$75  | administrative fee |
| +       | \$15  | trustee surcharge  |
| ;       | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing tee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-11989 Doc 1 Filed 04/24/18 Entered 04/24/18 17:44:55 Desc Main Document Page 55 of 64

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

| In r |  |  |  |  |  |  |
|------|--|--|--|--|--|--|
|      | Debtor(s) Chapter <b>7</b>   |  |  |  |  |  |
|      | DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)   |  |  |  |  |  |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  |  |  |  |  |  |
|      | For legal services, I have agreed to accept \$ 940.00  |  |  |  |  |  |
|      | Prior to the filing of this statement I have received \$ 302.50  |  |  |  |  |  |
|      | Balance Due \$ <b>637.50</b>   |  |  |  |  |  |
| 2.   | \$335.00 of the filing fee has been paid.  |  |  |  |  |  |
| 3.   | The source of the compensation paid to me was:   |  |  |  |  |  |
|      | ■ Debtor □ Other (specify):  |  |  |  |  |  |
| 4.   | The source of compensation to be paid to me is:  |  |  |  |  |  |
|      | ■ Debtor □ Other (specify):  |  |  |  |  |  |
| 5.   | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm  |  |  |  |  |  |
|      | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.   |  |  |  |  |  |
| 6.   | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |  |  |  |  |  |
|      | <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> </ul> |  |  |  |  |  |
|      | b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;  |  |  |  |  |  |
|      | c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  |  |  |  |  |  |
| 7.   | By agreement with the debtor(s), the above-disclosed fee does not include the following service:  a. Representation of the debtors in any dischargeability actions, judicial lien avoidances, or any other adversary proceeding.   |  |  |  |  |  |
|      | b. Debtor is responsible for the 2 mandatory credit counseling classes.  |  |  |  |  |  |
|      | c. This fee agreement does not include representation in motions to redeem.  |  |  |  |  |  |

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| In re | Nicole Willis |           | Case No. |  |
|-------|---------------|-----------|----------|--|
|       |               | Debtor(s) |          |  |

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

|  | CERTIFICATION  |
|--|--|
| I certify that the foregoing is a complete this bankruptcy proceeding. | statement of any agreement or arrangement for payment to me for representation of the debtor(s) in |
| April 24, 2018   | /s/ Julie M Gleason  |
| Date   | Julie M Gleason 6273536  |
|  | Signature of Attorney  |
|  | Gleason & Gleason  |
|  | 77 W Washington, Ste 1218  |
|  | Chicago, IL 60602  |
|  | (312) 578-9530 Fax: (312) 578-9524   |
|  | troy@chicagobk.com   |
|  | , Comongonius and  |



### **Chapter 7 Bankruptcy Retainer Agreement**

THE UNDERSIGNED CLIENT(S) EMPLOYS AND RETAINS GLEASON AND GLEASON, HEREINAFTER, ATTORNEY TO REPRESENT CLIENT(S) IN FILING A VOLUNTARY CHAPTER **7 BANKRUPTCY PETITION** 

THE PRE-PETITION SERVICES ATTORNEY WILL PROVIDE ARE CONSULTATION AND ADVICE, CONTACT AND COMMUNICATION WITH CREDITORS, PREPARATION OF THE BANKRUPTCY PETITION, SCHEDULES, STATEMENT OF FINANCIAL AFFAIRS, STATEMENT OF SOCIAL SECURITY NUMBER, MEANS TEST. CLIENT UNDERSTANDS THAT HE/SHE/THEY ARE SOLEY RESPONSIBLE FOR COMPLETING PRE-FILING CREDIT COUNSELING AND MUST OBTAIN A CERTIFICATE WHICH MUST BE FILED WITH THE COL

| COURT AT THE TIME OF FILING HIS/HER/THEIR PETITION. CLIENT IS RESPONSIBLE FOR ALL COSTS ASSOCIATED WITH SAID COUNSELING.   |
|--|
| THE EARNED FEE FOR THE PREPETITION SERVICE IS \$   |
| FILING FEE OF \$ 335.00  |
| TOTAL OF PREPETITION SERVICE AND FILING FEE (PAYABLE TO GLEASON AND GLEASON): \$   |
| RETAINED WITH (CASH   CHECK  DEBIT   MONEY ORDER) \$   |
| BALANCE DUE FOR PRE-PETITION ATTORNEY FEES AND FILING FEE \$ 12.50   |
| AFTER THE BANKRUPTCY CASE IS FILED I UNDERSTAND THAT I WILL BE PRESENTED WITH A SECOND RETAINER AGREEMENT TO PAY GLEASON AND GLEASON ATTORNEY FEES OF \$FOR POST FILING LEGAL SERVICES AND HAVE BEEN GIVEN A COPY OF THE PROPOSED AGREEMENT.   |
| CLIENT UNDERSTANDS THAT ONCE THE BANKRUPTCY CASE IS FILED THEY WILL NOT BE LEGALLY OBLIGATED FOR ANY OTHER FEES UNLESS AND UNTIL THEY ENTER INTO A SECOND RETAINER AGREEMENT PROMISING TO PAY FEES FOR THE REMAINDER OF MY REPRESENTION IN THIS CASE. CLIENT UNDERSTANDS THAT THEY ARE NOT OBLIGATED TO ENTER INTO AND MAY REFUSE TO SIGN THE SECOND RETAINER AGREEMENT. HOWEVER, GLEASON AND GLEASON RESERVES HE RIGHT TO WITHDRAW FROM REPRESENTATION IN THE EVENT THAT I DO NOT SIGN A SECOND RETAINER WITHIN 10 DAYS OF THE FILING OF MY CASE. CLIENT MAY SEEK OTHER LEGAL COUNSEL IF THEY DO NOT WISH TO BE REPRESENTED BY GLEASON AND GLEASON. |
| I UNDERSTAND THAT FEES PAID OR TO BE PAID ARE A FLAT FEE WHICH SHALL IMMEDIATELY BECOME PROPERTY OF GLEASON AND GLEASON IN AN EXCHANGE FOR A COMMITMENT BY GLEASON AND GLEASON TO PROVIDE LEGAL SERVICES. FUNDS WILL BE DEPOSITED INTO THE MAIN BANK ACCOUNT AND USED FOR GENERAL EXPENSES OF GLEASON AND GLEASON.   |
| LOCAL RULE 2091-1 (B) DISCLOSURE WITHDRAWAL DDITION, AND SUBSTITUTION OF COUNSEL   |
| FAILURE TO PAY - IN A CASE UNDER CHAPTER 7 OF THE BANKRUPTCY CODE, INCLUDING A CASE CONVERTED FROM CHAPTER 13, WHERE (1) THE DEBTOR'S ATTORNEY HAS AGREED TO REPRESENT THE DEBTOR CONDITIONED ON THE DEBTOR ENTERING INTO AN AGREEMENT AFTER THE FILING OF THE CASE TO PAY THE ATTORNEY FOR SERVICES RENDERED AFTER THE FILING OF THE CASE AND (2) THE DEBTOR REFUSES TO ENTER INTO SUCH AN AGREEMENT, THE COURT MAY ALLOW THE ATTORNEY.  DATE   |
| JOINT CLIENT   |

77 W WASHINGTON, STE 1218 CHICAGO, IL 60602 | (312) 445-8825 | CHILAWYERS.COM | OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.



### Gleason & Gleason

#### Chapter 7 Information and Advice

Attorney fees \$940 + Court costs \$335 / \$1275 total costs

Payment Plan: 3 payments of \$425. If all fees are not paid prior to the filing of your case, you will be asked to sign a post-petition fee agreement for services rendered after the filing of your case.

defense of motions brought on behalf of a creditor or a trustee, or conversion of a chapter 7 to a chapter 13. You will be charged \$30 to add any creditors after the case is filed. You will be charged \$100 for us to attend a second meeting of creditors if you miss your first meeting. If your case is closed for failure to take the second class, the court will require you to pay \$260 to reopen the case. Initial here: I understand it is the policy of Gleason and Gleason that I am required to take my second class between case filing and my first 341 meeting of creditors. I understand that if my case closes without discharge and my certificate is

Fees Cover: Intake appointment with attorney, petition preparation, representation at your first meeting of creditors, answering creditor calls and requests. FEES DO NOT COVER: Credit counseling - there are 2 MANDATORY CLASSES. Additional litigation for adversaries, redemptions, dated after the first 341 meeting of creditors it is my responsibility to pay \$260 to reopen it. Typical dischargeable debts: credit cards, medical bills, utilities, unsecured judgments, repossessions, personal loans, payday Non dischargeable debts: Alimony, child support, debts owed under a divorce decree, student loans, traffic tickets, parking tickets, fines, criminal restitution, debt for personal injury or death related to a DUI, overpayment of government benefits, taxes. Co-signors are still responsible for debts. Credit card charges over \$500 in the last 90 days and cash advances over \$750 in the 70 days may not be discharged. Secured Loans, Surrendering: (House|Car|Furniture|Jewelry) If you are surrendering a car or a house you are still responsible for tickets, code violations, HIDA Fees etc until ownership\title is transferred - usually through a sale, like an auction of the car or house. Title is not transferred through the bankruptcy process. You will be responsible for utilities if not disconnected. Loans through municipal credit unions may be secured by pensions. Credit union loans may be cross collateralized with other credit union loans. I understand I must continue to make regular payments on all secured Secured Loans Reeping: Initial here: loans I am keeping. I may have to mail in payments as auto debit and check by phone may be disabled until a debt is reaffirmed. I understand I am required to maintain insurance. Dunderstand that if I am keeping a property I must pay all mortgages including but not limited to 2nd mortgages and home equity lines of credit. Payday Loans | Autodebits | Post dated checks: You must stop them with your bank. It may require closing the bank account. after your filing date forward. If you bankrupt a phone or cellular service they may discontinue service. .Credit reporting: We pull credit reports from Transunion and Experian. We cannot guarantee the accuracy or completeness of the reports. Some creditors do not report to credit bureaus. It is your responsibility to review the report and inform us of any missing bills. Gleason and Gleason does not perform and this contract does not include any services relating to credit repair or correcting inaccurate credit reports. Credit bureaus may or may not report information regarding payments on cars or real estate you are keeping.

Utilities: If you bankrupt your utilities they are allowed to charge a deposit for future service and you must pay for any service used

Clients agree that they have received the following documents: copy of this retainer agreement, list of required items to file bankruptcy, debcor's duties as required under sec. 521, notice required by sec 527(a)(2), notice required by sec 527(b). Checks may be deposited electronically. Client agrees to pay reasonable attorney fees if collections become necessary.

Refund Policy: If Client wants to terminate Gleason and Gleason, Client must notify Gleason and Gleason in writing. Gleason and Gleason will then perform an accounting of time and services performed and issue a refund check (if applicable) within a reasonable time. For the purpose of determining the refund due, Gleason and Gleason's current hourly rate is \$300 an hour for attorney time.

| Client     |      | roto | WWW | Attorney                               |  |  |
|------------|------|------|-----|--|--|--|
| CIIOTIC    |      |      | 71  |  |  |  |
| Joint Clie | ent: | (    |     | ************************************** |  |  |



Go to website: www.summitfe.org <



- $\checkmark$  \$14.95 (pick the cheapest option)
- When it asks you to upgrade click "no thanks"
- When you create an account enter "Gleason" for lawyers name
- AFTER YOU PAY FOR THE CLASS YOU MUST COMPLETE THE CHAT PORTION OF THE CLASS FOR A CERTIFICATE TO BE ISSUED. THE CLASS IS NOT OVER UNTIL YOU SEE YOUR CERTIFICATE.
- They will automatically send us a copy of the certificate.



- Take after getting a case number and before your bankruptcy hearing.
- \$9.95 (Pick cheapest option)
- Summit will automatically file the certificate with the court when you complete it and they will send us a copy
- If you do not complete the class your case will close at the end, without discharge, and the court charges \$260 to reopen it, file the certificate and receive a discharge.

Acceptance Now Attn: Bankruptcy 5501 Headquarters Dr Plano, TX 75024

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438

Arnold Scott Harris 111 W. Jackson Ste 400 Chicago, IL 60604

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Barclays Bank Delaware 100 S West St Wilmington, DE 19801

BMO Harris Bank N.A. 111 W. Monroe St., Floor 21E Chicago, IL 60603-4096

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One/Neiman Marcus/Bergdorf Goodm Po Box 729080 Dallas, TX 75372

Chase Bankruptcy Department PO Box 15145 Wilmington, DE 19850

Chase Auto Finance National Bankruptcy Dept 201 N Central Ave Ms Az1-1191 Phoenix, AZ 85004 Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

ChexSystems
7805 Hudson Rd, Ste 100
Saint Paul, MN 55125

City of Chicago Attn: Mayor Rahm Emanuel 121 N LaSalle, #507 Chicago, IL 60602

City of Chicago - Dept of Finance Administrative Hearings 121 N LaSalle St 107A Chicago, IL 60602

City of Chicago Corporation Counsel Attn: Edward Siskel 30 N LaSalle St, Room 700 Chicago, IL 60602

City of Chicago Dept of Law Attn: Charles King 121 North LaSalle Street, Suite 600 Chicago, IL 60602

Dept Of Ed/582/nelnet Attn: Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501

Dsnb Bloomingdales Attn: Bankruptcy Po Box 8053 Mason, OH 45040

First Electronic Bank Attn: Bankruptcy 2150 S 1300 E Ste 400 Salt Lake City, UT 84070 Harley Davidson Credit Corp PO Box 829009 Dallas, TX 75382

Home Furnish Attention: Legal 5324 Virginia Beach Boulevard Virginia Beach, VA 23462

Illinois Department of Revenue Bankruptcy Section PO Box 64338 Chicago, IL 60664-0338

Illinois Dept of Employment Securit Bankruptcy Unit Collection Subdivis 33 S State St 10th Floor Chicago, IL 60603

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

MCSI Inc 7330 College Drive #108 Palos Heights, IL 60463

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Nelnet Nelnet Claims/Bankruptcy Po Box 82505 Lincoln, NE 68501

PayPal - Bill me later PO Box 105658 Atlanta, GA 30348

Santander Consumer USA 8585 N Stemmons Fwy, Ste 1100N Dallas, TX 75247

Secretary of State Attn: Safety & Financial Resp 2701 S Dirksen Pkwy Springfield, IL 62723

SQUARE CREDIT CARD READER 1455 Market St Ste 600 San Francisco, CA 94103

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

The Dump 815 Sidney Marcus Blvd NE Atlanta, GA 30324

### United States Bankruptcy Court Northern District of Illinois

| In re | Nicole Willis                              |   | Case No.            |                        |  |  |  |
|-------|--|---|---------------------|------------------------|--|--|--|
|       |  | Debtor(s)   | Chapter 7           |                        |  |  |  |
|       | VERIFICATION OF CREDITOR MATRIX            |   |                     |                        |  |  |  |
|       |  | Number of   | Creditors:          | 35                     |  |  |  |
|       | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credit             | ors is true and cor | rect to the best of my |  |  |  |
| Date: | April 24, 2018                             | /s/ Nicole Willis Nicole Willis Signature of Debtor |                     |                        |  |  |  |